
Name

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Phone

Email

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In the District Juvenile Justice Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Plaintiff</p> <p>V.</p> <p>_____ Defendant</p>	<p>Order on Motion to Shorten Period of Driver's License Suspension or Denial</p> <p>_____ Case Number</p> <p>_____ Judge</p>
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The matter before the court is the defendant's Motion to Shorten Period of Driver's License Suspension or Denial. This matter is being resolved by:(Choose all that apply.)

The default of Prosecuting Attorney Defendant/Respondent.

The stipulation of the parties.

The pleadings and other papers of the parties.

A hearing held on _____ (date), notice of which was served on all parties.

The Prosecuting Attorney

was present.

was not present.

Defendant

was present.

was not present.

was represented by _____ (name).

was not represented.

Having considered the documents filed with the court, the evidence and the arguments, and now being fully informed,

The Court Orders:

1. The Motion to Shorten Period of Driver's License Suspension or Denial is
 granted denied.

2. The clerk of the court shall transmit to the Driver License Division a copy of the findings of fact and conclusions of law, a copy of this order, and an abstract of the defendant's records.

3. The Driver License Division shall reinstate or issue the defendant's driver license unless it has other grounds for not doing so.

Judge's signature may instead appear at the top of the first page of this document.

Date

Signature ► _____
Judge _____

Approved as to form.

Date

Signature ► _____
Prosecuting Attorney _____

Date

Signature ► _____
Defendant or Attorney _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Order on Motion to Shorten Period of Driver's License Suspension or Denial on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

_____ Signature ► _____
 Date Printed Name _____