

DRIVER'S LICENSE/VEHICLE REGISTRATION SUSPENSION REQUEST TO
CLERK OF THE COURT, PINELLAS COUNTY, FLORIDA

Case Number: _____

I, _____, **Obligee/Petitioner**, request the Clerk of the Court, Pinellas County, Florida provide notice to the **obligor/respondent** of the **child support delinquency** and intent to suspend Driver's License/Vehicle Registration by regular mail that is posted to the obligor's last address of record with the Department of Highway Safety and Motor Vehicles as provided under **S.61.13016F.S.** and **S.322.245.**

Signed this _____ day of _____, 20 ____.

Obligee/Petitioner Signature

Address for Obligee/Petitioner

Obligor/Respondent Information:

Name

Current Address

City,

State

Zip

Birth date

Driver's License Number (if available)

Employer information (if available)

Employer information continued (if available)

SS#

This form is only for Non-IV-D cases, if your case is enforced by the Department of Revenue, Child Support Enforcement please contact them at 1-800-622-5437