

**APPLICATION FOR:**  
**Driving During Suspension – Intermediate Punishment**  
 Fee due with application - \$ 300  
**MONEY ORDER only made payable to COUNTY OF BLAIR**

DDS OFFENSE  1<sup>st</sup>  2<sup>nd</sup>  Alcohol Related  Non-alcohol  
 (Lifetime. This is not a 10 year look back offense)

NAME: \_\_\_\_\_ PHONE: (\_\_\_\_) \_\_\_\_\_

ALIAS AND/OR MAIDEN NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ SOCIAL SECURITY NUMBER: \_\_\_\_\_

COUNTY IN WHICH YOU LIVE:  BLAIR OTHER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
 \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

CASE NUMBER: \_\_\_\_\_ DATE OF OFFENSE: \_\_\_\_\_

ATTORNEY'S NAME: \_\_\_\_\_ PHONE #: \_\_\_\_\_

1 <sup>st</sup> Offense non alcohol	15 DAYS INCARCERATION	45 DAYS SCRAM (\$240 due at sentencing)
1 <sup>st</sup> Offense alcohol related	30 DAYS INCARCERATION	60 DAYS SCRAM (\$520 due at sentencing)
2 <sup>nd</sup> & Subsequent Offense(s)	60 DAYS INCARCERATION	120 DAYS SCRAM (\$1140 due at sentencing)

EMPLOYMENT / INCOME SOURCE: \_\_\_\_\_

EMPLOYER'S ADDRESS: \_\_\_\_\_

If you want to be considered for work release from the Blair County Prison, you must contact the Work Release Coordinator at (814) 693-3155 at least one week prior to going to jail.

I verify that the statements made in the foregoing application are true and correct to the best of my knowledge, information and belief. I understand that false statements herein are made subject to the penalties of 18 PA C.S.A. SEC. 4909 relating to Unsworn Falsification to Authorities

\_\_\_\_\_  
 DEFENDANT'S SIGNATURE

\_\_\_\_\_  
 DATE

**Please return this application at the preliminary conference or mail to:**  
 Blair Drug & Alcohol Partnerships, 3001 Fairway Drive, Suite D, Altoona, PA 16602  
 (in Fairway Centre between Pennsylvania Department of Environmental Protection & CareerLink)