

**STATE OF TEXAS
TEXAS DEPARTMENT OF PUBLIC SAFETY
DRIVER IMPROVEMENT & COMPLIANCE
BOX 15999
AUSTIN, TEXAS 78761-5999**

JUDGMENT CREDITOR'S Current Date _____
CONSENT TO ALLOW Accident Case No. _____
LICENSE AND REGISTRATION Date of Accident _____
Location _____
Street _____
City _____ County _____

In accordance with Section 601.334(a) of the Texas Motor Vehicle Safety Responsibility Act, I (We), _____
Judgment Creditor(s) in Cause No. _____,
Court, _____ County, Texas, do hereby consent the Judgment Debtor whose name, driver license number, date of birth, registration number and address is:

Name – First Middle Last DL Number Date of Birth Registration No.

Street or P.O. Box City State Zip Code

be allowed license and registrations for six months from the above date and therefore until after such consent is revoked in writing by the Judgment Creditor(s).

Signed _____
Judgment Creditor(s)

Address _____
Street of P.O. Box

City State Zip Code

Date of Birth DL Number

NOTE: The Judgment Debtor must file proof of financial responsibility for the future, Form SR22 certificate of liability insurance.