



STATE OF WASHINGTON
DEPARTMENT OF LICENSING
PO Box 9031 • Olympia, Washington 98507-9031

Petitioner's name _____)
)
WA driver license # _____)
Petitioner,)
v.)
STATE OF WASHINGTON)
DEPARTMENT OF LICENSING)
Respondent.)
_____)

SUBPOENA to a Driver's Hearing
Case report #: _____
Date of incident: _____

To: _____

HEARING DATE: _____
TIME OF HEARING: _____ Pacific Time

IN THE NAME OF THE STATE OF WASHINGTON, you are hereby required to appear **BY TELEPHONE** at a Department of Licensing hearing to be held on the above date and time.

This subpoena remains in effect until the conclusion of the hearing or until you are otherwise discharged by the Hearings Examiner. This hearing is a formal legal proceeding and the subpoena has been issued as authorized by law.

You must email the hearings unit at hearingsubpoenas@dol.wa.gov immediately to provide the telephone number where you can be reached on the date and time of the hearing. **Any reply to this subpoena must include the driver's name, license number, and date of the hearing.** If, with good cause, you are not able to appear for the scheduled hearing, contact the hearings unit by email as soon as possible.

Your failure to respond and/or appear to this subpoena as directed may result in the dismissal of the Department's action in the above captioned matter.

Subpoena requested by: _____

Dated this ____ day of _____, 20____.

Signature of Hearings Examiner: _____

Type or Print Hearings Examiner name: _____

Hearings unit—Phone: (360) 664-1444, Fax: (360) 570-4950, Email: Hearings@dol.wa.gov