NORTH CAROLINA DIVISION OF MOTOR VEHICLES

LICENSE & THEFT STATION AND/OR TECHNICIAN VIOLATION HEARING CANCELLATION FORM

I, ______________________, would like to cancel my Station and/or Technician Violation Hearing scheduled for ____________________________.

Please indicate whether the cancellation is being made for the station, technician or both.

☐  Station Violation Hearing  ☐  Technician Violation Hearing

Station Name:  Station License Number:

Station Address:  Station Phone number and Fax number:

Technician Name:  Technician License Number:

Technician Address:  Technician Phone number:

Name, Address, and Phone Number of Attorney (if applicable):

You may cancel your hearing at any time.

All hearing cancellation requests must be postmarked at least 10 business days prior to the scheduled hearing date to receive a partial refund. If the cancellation is not postmarked 10 business days prior, no refund will be provided.

Send your cancellation form by mail to: Division of Motor Vehicles, Attn: License & Theft Administrative Hearings, 3127 Mail Service Center, Raleigh, North Carolina 27697-3127. For questions, call 919-861-3509.

You may also fax your cancellation request form to 919-861-3990.

Please see Admin Code 19A NCAC 03K.0101 for further information.

Signature: ____________________________  Date: ____________