

**Company Name Here**

✆

Tel: +123 456 789

Tel: +123 456 789

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www.abc@gmail.com

www.abc@gmail.com

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Street address here

City, state 1234

**INSTRUCTIONS**

The employer of a person holding a Class DJ or MJ license or Limited Class DJ or MJ license must complete this certificate to allow the employee to drive **to and from work unaccompanied** by another licensed driver during specific hours. The licensee must work at least once a week for at least four consecutive weeks.

The license holder must carry this certificate at all times when driving to and from work. After separating the top of this form from the bottom, the licensee should fold the top part and keep it with his/her driver license.

**RESTRICTIONS**

This certificate is **not valid** for driving **during the hours of employment** (for example, to make deliveries or engage in sales) except for farm employment as indicated below.

This certificate is **not valid for driving in New York City at any time.**

This certificate allows the **Class DJ** and **Class MJ** licensee to drive to and from his/her place of employment **after 9 p.m**. **except in New York City, Nassau and Suffolk counties.** In **Nassau and Suffolk counties**, this certificate allows the **Class DJ** and **Class MJ** licensee to drive to and from his/her place of employment only between **5 a.m. and 9 p.m**; it also allows the licensee to drive while engaged in farm employment at any time.

This certificate allows the **Limited Class DJ** and **Limited Class MJ** licensee to drive to and from his/her place of employment **anytime**, **except in New York City, Nassau, Suffolk, Westchester, Rockland and Putnam counties**. With a **Limited Class DJ** or **Limited Class MJ** license, this certificate **cannot be used at any time** to drive **in New York City, Nassau, Suffolk, Westchester, Rockland and Putnam counties.**

I certify that is employed by me

Name of License

License ID

At \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of Business

Address of Business

I can be reached at

Address

Telephone Number

**HOURS OF EMPLOYMENT ARE:**