

AFFIDAVIT TO CURE A REFUSAL

North Dakota Department of Transportation, Driver License
SFN 58485 (4-2026)



Driver License Division
ND Department of Transportation
608 E Boulevard Ave
Bismarck ND 58505-0750

I, _____, being duly sworn and upon oath, state:

My name is:			
My address is:	City	State	ZIP Code
My driver's license number is:	My date of birth is:		

I was arrested for the offense of driving under the influence of alcohol or actual physical control of a motor vehicle in violation of NDCC 39-08-01 or equivalent ordinance, and I received a copy of a Report and Notice form that had a temporary operators permit.

I intend to voluntarily plead guilty to violating NDCC 39-08-01 or equivalent ordinance within twenty-five days after the date the temporary operators permit was issued to me.

I agree that my driving privileges must be suspended as provided under NDCC 39-06.1-10.

I acknowledge that I have a right to a section 39-20-05 administrative hearing and section 39-20-06 judicial review, and I voluntarily and knowingly waive these rights.

I agree that my driving privileges must be revoked as provided under NDCC 39-20-04(2) without an administrative hearing or judicial review, if I do not plead guilty within twenty-five days after the temporary operators permit was issued to me, if the court does not accept the guilty plea, or if the guilty plea is withdrawn.

Signature of Driver	Date
---------------------	------

Acknowledgement

I declare, under penalty of perjury under the law of North Dakota, that the foregoing is true and correct.

Signed on the _____ day of _____, _____ at _____, _____
(month) (year) (city or other location, and state) (county)

(printed name)

(signature)

INSTRUCTIONS FOR AFFIDAVIT

If you decide to use the procedure in NDCC § 39-20-04 (2) to avoid the revocation of your driver's license or driving privileges in North Dakota, you must do the following.

1. You must waive the administrative hearing. If you participate in an administrative hearing under NDCC § 39-20-05, you will not be able to use the procedure in NDCC § 39-20-04 (2) to avoid the revocation of your license or driving privileges.
2. You must mail, email, or fax this affidavit to the Department of Transportation within twenty-five days after the temporary operator's permit (Report and Notice form) was issued to you. (The date the form was issued to you is above the issuing officer's signature near the bottom of the page.)
3. You must plead guilty with the court within twenty-five days after the temporary operator's permit (Report and Notice form) was issued to you.
4. The court must have accepted your guilty plea and notice of that fact must be mailed or otherwise provided to the Department of Transportation within twenty-five days after the temporary operator's permit (Report and Notice form) was issued to you. A copy of the "Order Accepting Plea Petition" or a copy of the plea agreement from the court will suffice.

This affidavit and all notices or correspondence must be submitted to:

DRIVER LICENSE DIVISION
ND DEPARTMENT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0750
drs@nd.gov
Fax Number: (701) 328-2435

For additional information, call (701) 328-2604.