 **TRAFFIC SAFETY DIVISION**

**INSTRUCTIONS FOR COMPLETING THE VARIANCE**

**REQUEST LETTER AND**

**ACCOMPANYING AFFIDAVIT**

**REQUIRED DOCUMENTATION**

* Pursuant to Driver Safety Schools (DS) Rule 18.20.8.20, both a Request for Variance and an Affidavit in support are required to be submitted.
* For both the letter and the affidavit, wherever there is *italicized text* in following form letter and affidavit delete that text and replace it with the specific information requested.
* Regarding the affidavit, the person signing it must have the authority to bind the School and that person’s signature must be placed on the affidavit **only in the actual presence of** the Notary Public.
* Make sure to copy both the Variance Request letter and affidavit for your School’s records and mail all original documents to the address listed below.

**University of New Mexico**

**Traffic Safety Center**

**MSC07 4030,**

**1 University of New Mexico**

**Albuquerque, NM 87131-0001**

* If you need assistance or have questions, please call Andy Pena at

(505) 584-8365 or email [tscdriverprograms@unm.edu](mailto:tscdriverprograms@unm.edu).

*Date*

UNM Traffic Safety Center

MSC07 4030,

1 University of New Mexico

Albuquerque, NM 87131-0001

**Re: Variance Request Regarding Recertification**

Dear Licensing Staff:

Pursuant to Driving Safety Schools (DSS) Rule 18.20.8.20, *Name of School*  submits this request for a variance from DSS Rule 18.20.8.10 pertaining to annual renewal of its license on a 12 month basis. Specifically, *Name of School*  is requesting a variance to defer the commencement of its license renewal period from July 1, 2022, as provided for in DSS Rule 18.20.8.10A, to November 1, 2022.

*Name of School*  is also requesting a variance to defer the commencement of the certificate renewal period from July 1, 2022, as provided in DSS Rule 18.20.8.17A, to November 1, 2022 for the following instructor(s): *List all instructors' names*

The situation necessitating this variance request is the fact that the Transportation Commission has not yet approved the final DSS rule revisions, while approving the DWI school rule revisions. The two rule revisions include a revised renewal date of November 1, which will allow providers of DSS and DWI schools to stagger their licensing dates. In order to continue a staggered renewal program for these schools this year, DSS providers must therefore request a variance to the current rule.

Granting the variance request will not impact the applicability of the DSS Rule. The DSS Rule and the statutory Driving School Licensing Act will still be met and adhered to by *Name of School* . The public’s interest will be better served since the DSS schools will be able to stagger their license renewal dates, resulting in greater efficiency and cost-savings for both the providers and the State of New Mexico.

Pursuant to DSS Rule 18.20.8.20C, this variance request is accompanied by a signed affidavit in support. Please contact me at your convenience if you have questions. *Name of School*  thanks you for your consideration of its variance request.

Sincerely,

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*Date*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Your Name*

**AFFIDAVIT**

I, *Operator*, with *School Name*, located at *School Physical Address*, hereby state and affirm the following under penalty of perjury:

1. I have authority to speak on behalf of and bind *School Name* given my position as *Job Title*
2. I have reviewed the contents of the Request for Variance, along with the administrative rule for Driving Safety Schools, and affirm that the contents of the Request are true and correct to the best of my knowledge.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Your Name*

*\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

*Date*

(For Notary Public Only)

State of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

County of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

Subscribed and sworn to me on this \_\_\_\_ day of \_\_\_\_\_ 20­\_\_.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public

My commission expires on \_\_\_\_\_\_\_\_\_\_, 20\_\_.