I AM DEAF OR HARD OF HEARING

WHEN PULLED OVER, I COMMUNICATE USING THESE METHODS:

☐ American Sign Language
☐ Pen and Paper
☐ Lip-read and use what hearing I have
☐ Verbal Communication
☐ Other ________________________________

PLEASE HELP ME UNDERSTAND YOU:

☐ Don’t shine your flashlight in my eyes
☐ Try to eliminate background noise
☐ Don’t cover your mouth when speaking
☐ Don’t shout
☐ Speak clearly and in a normal tone
☐ Face me when you speak
☐ Be sure there is light for me to see you

REASONS FOR STOP:

☐ Speed Limit MPH
☐ Stop
☐ Cell Phone
☐ No Turn Signal
☐ Expired or Suspended
☐ No Turn On Red
☐ Headlight(s), Tail Light(s) or Brake Light(s)

DOCUMENTS:

☐ Driver’s License/Photo ID

YOU ARE BEING:

☐ Warned
☐ Ticketed
☐ Arrested

ASSISTANCE NEEDED:

☐ Medical Alert
☐ Hospital
☐ Fuel
☐ Tow
☐ Lost