

**Regulations to introduce measures to tackle drink driving in Northern Ireland**

**ANNEX A: Response Form**

Title: Mr/Mrs/Miss/Ms/Other (please state):

Name:

Organisation (if applicable)\*

Address:

Postcode:

E-mail address:

Date:

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| \*Organisation DetailsIf you are replying on behalf of an organisation, please explain who you represent and size of organisation: |
| Please note:The Department will prepare a summary of all the responses to this consultation letter. Copies of individual responses may also be made available to anyone that requests them.**I am/am not†** content for a copy of my response to be made available if requested.Please note that if you ask for your response to be kept confidential this will only be possible if it is consistent with our obligations under the Freedom of Information Act 2000. |

†please delete as appropriate

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| **FIXED PENALTIES****Q 1 - Do you have any comments on the Department’s approach to introducing fixed penalties for lower level drink driving offences?** |
| Comment on Q 1. |

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| **DISQUALIFIED UNTIL TESTED**Q 2 – Do you have any comments on the Department’s approach to the restriction of the requirement to re-sit the driving test to those disqualified for 12 months or more for offences involving higher levels of alcohol? |
| Comment on Q 2. |

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| **HIGH RISK OFFENDERS**Q 3 - Do you agree with the Department’s approach to reducing the threshold for High Risk Offenders to 125mg/100mls? |
| Please indicate your preference by ticking the appropriate box (√)**Yes ❑****No ❑****Neither ❑** |
| Comment on Q 3. |

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| CONSULTATION PROCESS |
| Q 4 - Do you have any comments to make on the consultation process? |
| Comment on Q 4. |

Thank you for taking the time to complete the questionnaire.

**Please return this form by 27 May 2016 to**:

John Brogan

Road Safety and Vehicle Regulation Division

Department of the Environment

Clarence Court

10-18 Adelaide Street

Town Parks

Belfast

BT2 8GB

Or e-mail: **drinkdrive@doeni.gov.uk**