



(SEE INSTRUCTIONS ON BACK)

NAME OF APPLICANT ON DRIVER'S LICENSE (Last, First, Middle Initial)				DRIVER'S LICENSE OR ID CARD NUMBER (If known)		DATE OF BIRTH	
STREET ADDRESS WHERE LICENSE IS TO BE MAILED				EYE COLOR	GENDER		HEIGHT
CITY	STATE	COUNTRY	ZIP/POSTAL CODE	CLASS (If known)	ENDORSEMENTS (If known)	RESTRICTIONS (If known)	

SECTION A

STATE THE REASON YOU CANNOT APPEAR AT DMV IN PERSON

OUT-OF-STATE OUT-OF-COUNTRY INCARCERATED/INMATE NUMBER: _____ **MILITARY**
(Complete Section E on back of form)

OTHER (Explain): _____

APPLICATION FOR:

DUPLICATE LICENSE (\$30.00) RENEWAL OF NON-DRIVER ID (\$22.50)

DUPLICATE NON-DRIVER IDENTIFICATION CARD (\$30.00) RENEWAL OF DRIVER LICENSE (\$66.00 for 6 year renewal or \$22 for 2 year renewal. A 2 year renewal is only available for operators 65 years or older)

DRIVER LICENSE RENEWALS ONLY: IF YOU ARE RENEWING YOUR DRIVERS LICENSE THIS FORM MUST BE RECEIVED BY THE DMV PRIOR TO YOUR EXPIRATION DATE.

AN ADDITIONAL LATE FEE OF \$25 WILL APPLY IF YOUR RENEWAL IS RECEIVED BY DMV AFTER YOUR EXPIRATION DATE.

REASON FOR DUPLICATE:

LOST

STOLEN

DESTROYED

CONNECTICUT RESIDENT ADDRESS (Number, Street, City or Town, State, Zip Code) **MILITARY:** Connecticut address at time of induction

CONNECTICUT MAILING ADDRESS (If different from Connecticut resident address)

E-MAIL ADDRESS	MAY WE CONTACT YOU VIA E-MAIL? <input type="checkbox"/> YES <input type="checkbox"/> NO	PHONE NUMBER YOU CAN BE REACHED AT (If available)	FAX NUMBER (If available)
SHOULD DMV CHANGE THE CURRENT MAILING ADDRESS TO THE ADDRESS WHERE THE LICENSE IS TO BE MAILED?	<input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU WANT TO BE IN THE ORGAN/TISSUE DONOR REGISTRY? <input type="checkbox"/> YES <input type="checkbox"/> NO IF YES, YOU ARE AGREEING TO BE A DONOR AND THE DESIGNATION WILL BE ON YOUR LICENSE.	

**SECTION B
DRIVER'S LICENSE ONLY**

Driver License Only: Your signature on this application attest and the information provided to the to the Commissioner of Motor Vehicles herein subscribed by me, the undersigned, under penalty of false statement, in accordance with the provisions of Section 14-110 and 53a-157b of the CT General Statutes, that your driving privileges is not under suspension and that you do not have any health problems or conditions that prevent you from driving safely. I understand that if I make a statement which I do not believe to be true, with the intent to mislead the Commissioner, I will be subject to prosecution under the above referenced laws.

APPLICANT'S SIGNATURE X	DATE
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**SECTION C
ID CARDS ONLY**

Identification Card Only: The information provided to the Commissioner of Motor Vehicles here is subscribed by me, the undersigned, under penalty of false statement, in accordance with the provisions of Section 14-110 and 53a-157b of the Connecticut General Statutes. I understand that if I make a statement which I do not believe to be true, with the intent to mislead the Commissioner, I will be subject to prosecution under the above referenced laws.

APPLICANT'S SIGNATURE X	DATE
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**SECTION D
FEES**

Circle applicable fees and determine correct amount

TRANSACTION TYPE	FEE
Duplicate License (military personnel are not exempt from duplicate fees)	\$30.00
Duplicate Non-Driver Identification Card (military personnel are not exempt from duplicate fees)	\$30.00
Renewal of Non-Driver ID	\$22.50
Renewal of 6 year driver license	\$66.00
Renewal of a 2 year driver license (only available for operators 65 years or older)	\$22.00
Late fee for renewal of driver license (You must apply a late fee if your application will be RECEIVED by DMV after its expiration date. Failure to include the late fee will delay the processing of your application).	\$25.00
TOTAL ENCLOSED	\$

INSTRUCTIONS:

NOTE: Out of State/Country Applicants: You **MUST** provide an out of state/country address, if you do not provide an out of state/country address your application **cannot** be processed by mail and you must appear at your local branch office. Your Connecticut license/identification will be sent to the out of state/country address provided via regular mail unless a prepaid overnight mailer is included with your request.

1. Only legal residents of Connecticut with a VALID CT license/identification card who meet the following criteria may use this application: a) must be temporarily located out of state/out of country b) currently incarcerated c) currently suffering from an incapacitating medical condition, which does not allow you to appear in person for your duplicate/renewal. (See number 4 for additional requirements)
2. Complete Section A in its entirety and section B if application is for a drivers license and section C if application is for an ID CARD. Type or print clearly.
3. Military: If recently honorably discharged or an active member of the armed services of the United States, Section E (below) must be completed if requesting a no fee renewal. A fee exemption is not given for duplicate licenses or identification cards.
4. Medical Condition: If request is due to a incapacitating medical condition this application must be submitted with the Request to renew or obtain duplicate by mail due to medical conditions (CI-1) form
5. Mail completed application to DMV Centralized Issuance Unit, 60 State St. Wethersfield, CT 06109 (Make checks or money orders payable to "DMV" - All funds must be in United States dollars drawn from a United States bank).

The following transactions cannot be renewed through the mail: A renewal of a commercial driver license (CDL) or public service license or a change of name. These transactions must be processed in person at a full-service DMV.

Effective October 3, 2011 the Centralized Issuance Unit will not be issuing "VERIFIED" licenses or identification cards through the mail unless they have been previously verified by the Department of Motor Vehicles.

If a duplicate license/identification card is requested and it has not been verified you will be issued a "Legacy" license/identification card.

If a renewal of an license/identification card is requested and it has not been verified you will be issued a license/identification card that is marked "NOT FOR FEDERAL IDENTIFICATION"

CURRENT VERIFIED LICENSE HOLDERS ONLY: In order to maintain your verified license status you must appear in person every other license/identification card renewal (6 CFR 37.25).

ACTIVE MILITARY PERSONNEL ONLY SECTION E

Connecticut General Statutes, Section 14-50(c). The Commissioner of Motor Vehicles shall waive the operator's license fee and examination fee in the case of any person in the active service of the armed forces of the United States who was a legal resident of Connecticut at the time of his induction; and for one licensing period to any person honorably separated from service who applies therefore within two years following the date of separation and was a legal resident of Connecticut at the time of his induction.

I AM ENTITLED TO A WAIVER BECAUSE OF <i>(Check One)</i>	<input type="checkbox"/> Present Active Service in U.S. Armed Forces <input type="checkbox"/> Honorably Separated From Active Service <small><i>(If checked, fill in date of separation and submit copy of separation papers -DD214)</i></small>	DATE OF INDUCTION	DATE OF SEPARATION
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RANK	BRANCH OF SERVICE
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NAME AND MAILING ADDRESS OF ARMED FORCES UNIT

I certify that I was a legal resident of the state of Connecticut at the time of my induction and that all information provided in this application is correct.	SIGNATURE OF APPLICANT X
I certify under penalty of false statement in accordance with provision of Section 14-110 and 53a-157b of the Connecticut General Statutes that the above named applicant is in the active service of the U.S. Armed Forces. I understand that if I make a statement which I do not believe to be true, with the intent to mislead the Commissioner, I will be subject to prosecution under the above referenced laws.	SIGNATURE OF COMMISSIONED OFFICER IN CHARGE <i>(If Active)</i> X