CHANGE OF ADDRESS AND ORGAN/TISSUE DONOR STATUS B-58 REV. 1-2012

STATE OF CONNECTICUT DEPARTMENT OF MOTOR VEHICLES On The Web At ct.gov/dmv

INSTRUCTIONS - PLEASE PRINT INFORMATION

- 1. Joint owners may use this form if both operators' license/non-driver ID numbers are listed.
- 2. Form must be signed and dated by all applicants.
- 3. Copy information from your current registration. If more than four (4) marker plate numbers, use additional change of address forms.
- **4.** Keep your license/non-driver ID(s) and registration(s). On the registration(s), cross out the old address and write the new address in the space provided. Affix the new address label to the **back** of your license/non-driver ID(s). Labels can be obtained from any Police Department or by calling <u>DMV's Phone Center</u>.

CHECK CHANGES OPERATOR'S LIC	CENSE/NON-DRIVER ID	MOTOR VEHIC	CLE REGISTRATIO	ON UESSEL REG	ISTRATION		
I CONSENT TO ORGAN AND TISSUE DONATION AND WISH TO BE IN THE DONOR REGISTRY			□ I NO LON	☐ I NO LONGER WISH TO BE IN THE DONOR REGISTRY			
CHANGE OF ADD	DRESS IS NOT FOR VOTER F	REGISTRATION PURP	POSES				
NAME (Last, First, Middle Initial) - APPLICANT 1			NAME (Last, First, N	NAME (Last, First, Middle Initial) - APPLICANT 2			
(NEW) MAILING ADDRESS (A	No. and Street, City or Town, State, Zip (Code)					
RESIDENT ADDRESS, IF DIF	FERENT FROM MAILING ADDRESS						
Tax Town - Connecticut town where vehicle in the normal course of operation most frequently leaves from, returns to or remains.							
SIGNATURE		DATE	SIGNATURE			DATE	
X			X				
accordance with the pr	ed to the Commissioner of Mot ovisions of Section 14-110 and the intent to mislead the comm	d 53a-157b of the Conn	ecticut General Sta	tutes. I understand that if I	ty of false state make a statem	ement, in ent which I do not	
OPERATOR'S LICENSE/NON-DRIVER ID NUMBER(S) (9 digits)							
1.			2.				
VESSEL INFORMATION							
STATE	NUMBER NUMBER			EXPIRATION DATE			
		REGISTRATIO	ON INFORMATION				
TYPE OF PLATE (Camper, Passenger, Comb., etc)		MARKER PLATE NUMBER		EXPIRATION DATE			
					Month	Year	
					Month	Year	
					Month	Year	
					Month	Year	
FORMER ADDRESS						:	