



(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:	REASON FOR DUPLICATE:
<input type="checkbox"/> DUPLICATE LICENSE (\$30.00)	<input type="checkbox"/> LOST
<input type="checkbox"/> DUPLICATE NON-DRIVER IDENTIFICATION CARD (\$30.00)	<input type="checkbox"/> STOLEN
<input type="checkbox"/> DUPLICATE LEARNER PERMIT (\$19.00)	<input type="checkbox"/> DESTROYED
<input type="checkbox"/> RENEWAL OF NON-DRIVER ID (\$22.50)	
<input type="checkbox"/> RENEWAL OF DRIVER LICENSE (\$72.00 for 6 year renewal or \$24.00 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 AND PAYMENT IS RECEIVED BY DMV AFTER YOUR EXPIRATION DATE.**

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)
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THIS FORM CANNOT BE USED TO CHANGE YOUR ADDRESS PERMANENTLY - YOU MUST COMPLETE A INDIVIDUAL CHANGE OF ADDRESS (B-58) TO CHANGE YOUR ADDRESS.

DO YOU WANT TO BE IN THE ORGAN/TISSUE DONOR REGISTRY?  
 YES     NO    IF YES, YOU ARE AGREEING TO BE A DONOR AND THE DESIGNATION WILL BE ON YOUR LICENSE.

**SECTION B - CERTIFICATION FOR DRIVER'S LICENSES AND IDENTIFICATION CARDS**

The information provided to the Commissioner of Motor Vehicles on this form is subscribed by me, the undersigned, under penalty of false statement, in accordance with the provisions of Sections 14-110 and 53a-157b of the Connecticut General Statutes. I understand that if I make a statement that 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. **Additional Certification for Driver's License:** I also swear or affirm, under penalty of false statement, that my driver's license or driving privilege is not suspended, revoked or withdrawn, and that I do not have any health problems or conditions that prevent me from driving safely.

APPLICANT'S SIGNATURE <b>X</b>	DATE
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**SECTION C - 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
Duplicate Learner Permit	\$19.00
Renewal of Non-Driver ID	\$22.50
Renewal of 6 year driver license	\$72.00
Renewal of a 2 year driver license (only available for operators 65 years or older)	\$24.00
LATE FEE for the renewal of driver license (A late fee will be applied on all applications (must include payment) RECEIVED by DMV after its expirations date).	\$25.00
<b>TOTAL ENCLOSED</b>	\$

**SECTION D - VOTER REGISTRATION APPLICATION**

**TO APPLY TO REGISTER TO VOTE YOU MUST BE:** A United States citizen; at least 18 years of age (by election day); and a resident of Connecticut and the city or town where you are applying to register to vote.

Are you a citizen of the United States of America?     YES     NO

Will you be 18 years of age on or before election day?     YES     NO

If you checked "NO" in response to either of these questions, do NOT complete below this line as you cannot register to vote.

Do you wish to enroll in a political party?

YES    **NAME OF PARTY:**     DEMOCRATIC     REPUBLICAN

OTHER: \_\_\_\_\_

NO    **I DO NOT WISH TO ENROLL IN A PARTY AT THIS TIME AND WILL BE REGISTERED AS UNAFFILIATED**

Note: Declaring a party enables you to vote in the party's primary election, which is open only to party members. You may later choose to switch enrollment to or from a political party.

**LEAVING THIS SECTION BLANK WILL AUTOMATICALLY RESULT IN SELECTING UNAFFILIATED**

**VOTER DECLARATION:**

- I swear or affirm under penalty of perjury that:
  - \* I am a U.S. Citizen
  - \* I live in Connecticut at the address shown above
  - \* I am at least 17 years old and will be 18 years old on or before election day
  - \* I have not been convicted of a disfranchising felony, or if so, I am eligible to register to vote

SIGNATURE OF APPLICANT**	TODAY'S DATE
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\*\*Voter registrations without signatures will not be processed.

The information that I have provided is true to the best of my knowledge under penalty of perjury. If I have provided false information, I may be subject to a fine or imprisonment or both under federal or state laws.

By signing this application form, I agree to allow the signature from my license record to be used as the signature on my voter registration record.

PAYMENT ENCLOSED (Check or money order)

CREDIT CARD PAYMENT (Please call (860)263-5401 1 business day after emailing/faxing the form to provide credit card number. Credit card payments must be received prior to expiration date or the late fee will apply).

**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.

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 5 for additional requirements)
2. Complete section A entirely. Type or print clearly. Sign the certification in section B.
3. Complete Section D if you want to apply to register to vote in CT. To register, you must be a U.S. citizen and at least 18 years old before the next election. You are not a voter until your application is approved by the registrar of voters in your CT town of residence. If you do not receive an acceptance or rejection within three weeks, contact the registrar of voters.
4. 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.
5. 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.
6. Send completed application through either postal mail, e-mail or fax (email or fax will reduce wait time).

**MAIL**

Send the completed application and payment (fees are listed in section C) of check or money order drawn on United States bank (dollar currency) and mail to:

**Department of Motor Vehicles  
60 State Street  
Wethersfield, CT 06109  
Attn: Central Issuance Operations Unit**

**E-MAIL OR FAX**

E-mail completed form(s) to DMV.CIU@ct.gov or fax to 860-263-5591. After one business day contact the Central Issuance Operations Unit at 860 263-5401 (Monday-Friday 8:30 a.m. to 3:00 p.m.) to make a credit card payment (MASTERCARD, VISA OR DISCOVER ONLY).

**NOTE - LICENSE RENEWALS:** Payments must be received prior to or the day of expiration or \$25.00 late fee will be charged.

The following transactions cannot process through the mail: Renewal of commercial driver license (CDL), public service license, name change, or drive-only permit/license.

Per REAL ID Act, you are allowed only two consecutive renewals through the mail before a new photo is required.

**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.

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

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.	<b>SIGNATURE OF APPLICANT</b> <b>X</b>
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.	<b>SIGNATURE OF COMMISSIONED OFFICER IN CHARGE (If Active)</b> <b>X</b>