

PHOTO IDENTIFICATION CARD

APPLICATION FOR CHANGE/CORRECTION/REPLACEMENT/RENEW | Bureau of Driver Licensing, P.O. Box 68272, Harrisburg, PA 17106-8272

1. [2. [HECK APPLICABLE BLOCK: REPLACEMENT (DUPLICATE RENEWAL CHANGE OF CORRE	E) — Complete Sections A, B, C, and D (if	if applicat	ble), E and F (if appl	licable).	All requests must be	notarized.	
A		E ALL PARTS OF SECTION A	арріісавіс		10). <u>140te</u>	ii ization is not required.		
	LICENSE/PERMIT/ID NUMBER	LAST NAME					JR./ETC	
	FIRST NAME			MIDDLE	NAME		·	
		TELEPHONE NUMBER (8:00A.M 4:30P.M.)		E-MAIL ADDRESS (if appli	icable)			
	MONTH DAY YEAR							
В	REASON REPLACEMENT REC	,	E C	ORRECTION 01	THER _			
	Pennsylvania strongly suppo ORGAN DONOR DESIGNATION	rts organ and tissue donation because: ADD (Parental consent in Section I			enhan	•		
C								
٦	ADDRESS CHANGE - A Post Office Box	number may be used in addition to the actual residence a	address, but c	annot be used as the only ad	dress. See	reverse if using an out-of-state ac	ddress.	
ı	STREET ADDRESS							
	CITY STATE PA ZIP CODE							
	If you are a registered voter in PA, would you like us to notify your county voter registration office of this change? If you are not a registered voter, you may contact your county voter registration office. YES NO							
	NAME CHANGE (Please note all name of	changes must be done in person with original documents)	REASON:	MARRIAGE	DIV	ORCE OTHER (see r	reverse side)	
	LAST		JR., E	rc. FIRST NAME		MIDDLE	NAME	
	OTHER CHANGES		-					
Ì	EYE COLOR (Please check one): BLUE BROWN GREEN HAZEL PINK BLACK GRAY DICHROMATIC OTHER							
ł						URITY NUMBER		
	MONTH DAY	YEAR FEET INCHES						
⊣								
D	MUST BE COMPLETED IF APPLICANT IS UNDER THE AGE OF 18 APPLYING FOR A LEARNER'S PERMIT OR ORGAN DONOR DESIGNATION							
	I hereby certify that I am a Parent, Guardian, Person in Loco Parentis, or Spouse at least 18 years of age, and							
	I Do give consent I Do not give consent for applicant's request for Organ Donor designation.							
	(Signature of Paren	nt, Guardian, Person in Loco Parentis, or Spouse	at least 18	years of age.)		(Date)		
E	AUTHORIZATION AND CERT	(IFICATION			FN	OTARY (see instructio	ns on back)	
	For Veterans wishing to add the Veterans Designation to their Driver's License or ID Card: I certify under penalty of law that I am a qualified applicant and hereby request it be added to my product. I understand that misrepresentation will result in the cancellation of my identification card. I acknowledge that receiving a Pennsylvania Permit, License or ID card will cancel or invalidate any Permit, License or ID card from another state. I certify under penalty of law that all information given on this application is true and correct. I hereby authorize the Social Security Administration to release to the Department of Transportation information concerning my Social Security Identification Number for the purpose of identification. If using a Messenger Service, I hereby authorize the Department to furnish them with my driving record for the purpose of processing this form. I hereby acknowledge this day that I have received notice of the provisions of Section 3709 of the Vehicle Code. (See reverse for provisions.)			This section must be notarized when applying for a replacement (duplicate) Pennsylvania Identification Card. You are entitled to a free replacement ONLY if this application is completed within 90 days of the original date of issuance and the original was never received due to loss in the mail.				
				SUBSCRIBED AND SWORN TO BEFORE ME: MO. DAY YEAR				
	☐ I wish to contribute \$1.00 to the Organ Donation Awareness Trust Fund.(see reverse)				SIGNATURE OF PERSON ADMINISTERING OATH			
	I wish to contribute \$3.00 to the V	I wish to contribute \$3.00 to the Veterans' Trust Fund. (see reverse) SIGN HERE Applicant's Signature in Ink (Date) (Date) (Date)						
						S		
						SIGN IN		
	WARNING: Misstatement of fact is a misdemeanor of the third degree punishable of up to \$2,500 and/or imprisonment up to 1 year (18 Pa C.S. Section 4904(b)). PAID BY: Check Money Order Payable to PennDOT					PRESENCE OF	NOTARY	
		y Order Payable to PennDOT accept cash, credit or debit cards)	TOTA	L \$	_ L			

Relationship to person meeting exemption (check one):

OUT-OF-STATE ADDRESS CHANGE. We may not issue driver license products to an out-of-state address, except in the case of an employee of federal or state government, armed forces personnel, or their families, whose workplace is located outside of Pennsylvania. If this exception applies to you, please check the appropriate box and include documentation of your status with this application.					
Attach a letter from your employer on their letterhead to document your status, or attach a copy of your current Photo ID issued by your employer. If you are the immediate family of a person meeting one of the allowable exceptions, attach the documentation of the person employed. Additionally, you must indicate your relationship to that person.					
I certify that my workplace is located out of state and I am employed by, or am the immediate family of a person employed by: US Armed Forces Federal Government Pennsylvania State Government					

• Veterans Designation: You have the opportunity to add the veterans designation to your driver's license, which clearly indicates you are a veteran of the United States Armed Forces. To qualify, you must have served in the United States Armed Forces, including a reserve component or the National Guard, and have been discharged or released from such service under conditions other than dishonorable. If you are requesting to add the veterans designation to your license, make sure you check the box at the top in Section E.

Spouse

Dependent Child

- Return your completed and signed application with your check or money order made payable to "PennDOT", to: Bureau of Driver Licensing, P.O. Box 68272, Harrisburg, PA 17106-8272.
- If you find or recover your original license after you have submitted this application for a duplicate, return the original license with a letter of
 explanation to: Bureau of Driver Licensing, PO Box 68615, Harrisburg, PA 17106-8615. After the duplicate is issued, the original license is
 no longer valid.

REPLACEMENT/ RENEWAL OF PHOTO ID	APPLICATION FOR REPLACEMENT OF A CAMERA CARD OR A PRODUCT NEVER RECEIVED MUST BE NOTARIZED IN SECTION F.
REPLACEMENT OF A PHOTO ID OR PHOTO ID CAMERA CARD	FEE: \$5.00 - if photo was not taken with the original camera card. FEE: \$29.50 - if photo was taken with the original Camera Card. If photo image is on file, the Bureau will issue a Photo Identification Card.
RENEWAL OF PHOTO ID	Fee: \$30.50
UPDATE CARD	No Fee. (update cards are not issued if requesting a change of Organ Donor designation status)
ORGAN DONOR DESIGNATION	When you are adding or removing the Organ Donor designation, the form must be notarized and a replacement fee is required.
ORGAN DONATION AWARENESS TRUST FUND (ODTF)	You have the opportunity to contribute \$1.00 to the Fund. The additional \$1.00 contribution must be added to the fees above and included in your payment by check/money order. You must also check the block provided in Section E to ensure proper handling of your contribution.
VETERANS' TRUST FUND (VTF)	You have the opportunity to make a tax deductible contribution to the VTF. Your contribution will help support programs and projects for pennsylvania veterans and their families. Since this additional \$3.00 is not part of the fee, please add the donated amount to your payment. Also, please check the proper block on the form to ensure your contribution is handled properly.
CHANGE/CORRECTION ONLY	NO FEE REQUIRED — The Bureau will issue an update card reflecting the change/correction which must be carried with the Pennsylvania Identification Card. Notarization is not required.

NAME CHANGE - If you desire to use your birth name, you must present your state issued birth certificate with a raised seal. If your name changed by permission of court, you must present a Certified Copy of the Court Order. If you desire to use your spouse's surname, you must present your marriage certificate. If you desire to use another name, you must present your Social Security Card, together with two other sources issued in the desired name such as: Tax Records, Selective Service Card, Voter Registration Card, Passport, any form of Photo I.D. issued by a governmental agency, banking records, or baptismal certificate.

To report errors on your driver's license relating to name, date of birth or social security number, please contact PennDOT's Customer Care Center at 717-412-5300. TTY callers - please dial 711 to reach us.

If you are required to present supporting documentation to correct your record, all documents must be originals and presented in person at a PennDOT Driver License Center.

- For NAME corrections, you must present your state issued birth certificate with a raised seal, a Certified Copy of the Court Order or your marriage certificate.
- · For DATE OF BIRTH corrections, you must present state issued birth certificate with raised seal.
- For SOCIAL SECURITY NUMBER corrections, you must present your Social Security Card.

*Note: All name changes must be made in person at a Driver License Center. All documents must be original.

Section 3709 provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or upon any other public or private property without the consent of the owner thereof or into or on the waters of this Commonwealth, from a vehicle, any waste paper, sweepings, ashes, household waste, glass, metal, refuse or rubbish or any dangerous or detrimental substance, or permitting any of the preceding without immediately removing such items or causing their removal.

For any violation of Section 3709, I may be subject to a fine of up to \$300 upon conviction, including any violation resulting from the conduct of any other persons present within any vehicle of which I am the driver.