

APPLICATION FOR PENNSYLVANIA NON-COMMERCIAL DRIVER'S LICENSE BY OUT-OF-STATE NON CDL DRIVER

YOU MUST APPLY IN PERSON

Α	LAST NAME (S)										JR., ETC.	
П												
	FIRST NAME	MIDDLE NAME								_		
		SOCIAL SECURITY NUMBER					TELE	TELEPHONE NUMBER (8:00 a.m. to 4:30 p.m.)				
	MONTH DAY YEAR FEET INCHES	THO ISO										
	EYE COLOR (Please check one): BLUE BROWN GF	REEN HAZEL PINK BLAC				K GRAY DICHROMATIC			отн	OTHER		
	STREET ADDRESS: A Post Office Box number may be used in addition to t cannot be used as the only address.	he actual re	sidence addre	ess, but C	TY					STATE	ZIP CODE	
	e Department is required to obtain the Licensee's Social Security Number, height and eye color under the provisions of Section 1510(a) and/or 1609(a)(4) of the Pennsylvania Vehicle Code. This information will be used										tion will be used as	
		tiffying information in an attempt to minimize driver license fraud. Federal law permits the use of the Social Security Number by state licensing officials for purposes of identification.										
ᅵ	ennsylvania strongly supports organ and tissue donation because of its life-saving and life-enhancing opportunities. ADD (Parental consent in Section C required if under 18) REMOVE LL STATEMENTS MUST BE ANSWERED Please check only the boxes that apply to you, that would prevent you from having reasonable control of a motor vehicle.											
В		_	_								r vehicle.	
	☐ Neurological disorders ☐ Neuropsychiatric disorders ☐ Circulatory disorder ☐ Cardiac disorder ☐ Hypertension ☐ Uncontrolled Epilepsy ☐ Uncontrolled Diabetes ☐ Cognitive Impairment ☐ Alcohol abuse ☐ Drug abuse											
	Conditions causing repeated lapses of consciousness (e.g. epilepsy, narcolepsy, hysteria, etc.)											
	Specify: If seizure disorder, date of last seizure: If seizure disorder, date of last seizure: If seizure disorder, date of last seizure:											
	Other											
	NOTE: Any recommendations/additional comments must accompany this certificate on a health care provider's letterhead. THIS DEPARTMENT MAY REQUIRE A PHYSICAL EXAMINATION BY A PROVIDER OR CAUSE. Check Applicable Block YES NO											
	THIS DEPARTMENT MAY REQUIRE A PHYSICAL EXAMINATION BY				0(0)2							
	If ves, what was your previous record number and/or name(1. Have you ever held a PA Driver's License/Learner's Permit/ID Card in this or any other name(s)?										
	 Other than the one you are surrendering, are you in possession of any valid Driver's License/Photo ID from any other state or licensing jurisdiction? Is your right to apply for a license or your privilege to operate a vehicle in this or any other state currently suspended or revoked? If yes, give state reason											
	of your driver's license or driving privilege? If yes, give state date reason the your driver's license or driving privilege? If yes, give state and the reason that you currently required, or have you been cited for a violation that will require you, to only drive vehicles equipped with an Ignition Interlock device?											
С	CONSENT OF PARENT, GUARDIAN, PERSON IN LOCO PARENTIS OR SPOUSE AT LEAST 18 YEARS OF AGE (Complete if Applicant is Less Than 18 Years of Age.) I hereby certify that I am Parent, Guardian, Person in Loco Parentis or Spouse at least 18 years of age, of the applicant named herein, that the statements made											
	herein are true and correct to the best of my knowledge and that						or age, or	the applicant name	u nerem,	liial liie	Statements made	
	☐ I do give consent											
	I do not give consent for applicant's request for Organ Donor designation. HERE (signature of parent, Guardian, Person in Loco Parentis or Spouse at Least 18 Years of Age - IN INK)											
П	AUTHORIZATION AND CERTIFICATION			(SIC	NATURE OF PAR	ENT, GOAND	IAN, FERSON	IN ECCO PANEIVIS ON SPOUS	E AT LEAST	TO TEARS OF	FAGE - IN INNY	
닉	For Veterans wishing to add the Veterans Designation	to their Dr	river's Licer	se or ID C	ard: I certify	under pe	enalty of la	aw that I am a qualified	d applicar	nt and he	reby request it be	
	added to my product. I understand that misrepresentation											
	I certify under penalty of law that the information contained herein is concerning my Social Security Identification number for the purpose			·						:		
	purpose of processing this form. I hereby acknowledge this day that I								rovisions.) WARNIN	IG: Misstatement of	
		fact is a misdemeanor of the third degree punishable by a fine of up to \$2,500 and/or imprisonment up to 1 year (18 PA C.S. Section 4904 [b]).										
		I am under the age of 18 years and I hereby request Organ Donor designation on my PA Driver's License. (Applicant's 18 years of age or older will have the opportunity to request Organ Donor designation at the Photo Center at the time they have their photo taken.)										
	I wish to contribute \$1.00 to the Organ Donation Awareness Trust Fund (see reverse).											
	I wish to contribute \$3.00 to the Veterans' Trust Fund (see reverse). (APPLICANT'S SIGNATURE IN INK) (DATE)									(DATE)		
	PAID BY: Check Money Order Payable	to Penn	DOT (Cas	h, Credit,	or Debit (Card CA	NNOT b	e accepted)	TOTA	L S	5	
E EXAM REPORT								EXAMINER'S DRIVER CERTIFICATION				
П	VISION SCREENING CHECK (V) YES NO	Uncorrected Corrected						at the above applicant				
	20/40 vision or less in better eye with correction									/ania Driv	er's License.	
	Report of Eye Examination (attached)	20/ Left Eye 20/										
	Qualified with Restrictions	20/ R	Both L Field:			DATE OF I	SSUE:	(SIGNATURE OF EXAMINER)		(DLE NO.)		
	☐ Corrective Lenses ☐ Other:	R L FIEIGS R L MONTH DAY							YEAR			
	Qualified Without Restrictions	Classes which should be endorsed on the Driver's PA License.			EXAM CENTER:							
	,,	A	ШВ	Шс	ШМ	PA DRIVE	R'S LICENSE	NUMBER:				
	Former Driver's License # State	·										

Individuals transferring a non-commerical driver's license, must be at least 16 1/2 years old.

— FEE INFORMATION -

4-Year Photo\$30.50 * 4-Year Photo with Class M.....\$35.50

Drivers age 65 and over have the option of requesting a driver's license valid for two years instead of four. Fees for this option are:

2-Year Photo.....\$2.00 * 2-Year Photo with Class M.....\$25.00

If you would like to contribute to the Organ Donation Awareness Trust Fund, add an additional\$1.00

If you would like to make a tax deductible contribution to the Veterans' Trust Fund (VTF), add an additional\$3.00

*This additional fee is required by Act 31, 1984 and will be used to support the Motorcycle Safety Educational Program in the Commonwealth of Pennsylvania.

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 your payment. You must also check the block provided to ensure proper handling of your contribution. The ODTF provides for the development and implementation of donor awareness programs and funds shall be appropriated subject to the approval of the Governor.

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.

You MUST appear in person at a Driver License Center and surrender your out-of-state license to apply.

- 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 D.
- No person shall receive a Pennsylvania Non-Commercial Driver's License unless and until the person surrenders to the Department all valid licenses in the person's possession issued by this or any other state.
- Final approval of this application for a Pennsylvania Non-Commercial Driver's License is subject to verification of the applicant's past driver record history. Should verification disclose outstanding violations in any state or jurisdiction, the application will be denied and all issued Pennsylvania Driver's Licenses are subject to cancellation and recall.
- · It is unlawful for any person:
- ◆ To exhibit, cause a permit to be exhibited, or have in possession any recalled, cancelled, suspended, revoked, fictitious, or fraudulently altered driver's license.
- ◆ To lend a driver's license to any other person or permit the use thereof by another.
- ◆ To exhibit or represent as one's own any driver's license not issued to the person.
- ◆ To fail or refuse to surrender to the Department upon lawful demand a recalled, cancelled, suspended, revoked, fictitious, or fraudulently altered driver's license.

PENALTIES AND SANCTIONS

Any persons violating any of the above is guilty of a summary offense and shall, upon conviction, be sentenced to pay a fine of \$100. The Department may cancel any driver's license upon determining that the licensee was not entitled to the issuance or that the person failed to give the required or correct information or committed fraud in making the application or in obtaining the license or the fee has not been paid.

Any Pennsylvania driver who is convicted of any of the above offenses shall be assessed 3 points as of the date of violation.

 A PERSON IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE IF THE PERSON, WITH FRAUDULENT INTENT, HAS POSSESSION OF, SELLS OR ATTEMPTS TO SELL, USES OR DISPLAYS A DRIVER'S LICENSE, KNOWING IT TO HAVE BEEN ALTERED, FORGED OR COUNTERFEITED.

Any person committing this offense is, upon conviction, subject to imprisonment for a term of up to 5 years.

The Department shall revoke the driver's license privilege of any driver for one year upon receiving a certified record of the driver's conviction of this offense.

TO MEET IDENTIFICATION REQUIREMENTS YOU MUST PRESENT THE FOLLOWING

U.S. CITIZENS

Social Security Card (must be original; card cannot be laminated) and <u>ONE</u> of the following:

- Birth Certificate with raised seal (U.S. issued by an authorized government agency, including U.S. territories or Puerto Rico. No other birth documents will be accepted.
- · Certificate of U.S. Citizenship (BCIS/INS Form N-560)
- · Certificate of Naturalization (BCIS/INS Form N-550 or N-570)
- Valid U.S. Passport (Only valid U.S. Passports and original documents will be accepted.)

Note: Your Out-of-State Driver's License must be surrendered at the time you make application.

NON-U.S. CITIZENS

You must bring ALL of the following:

- · Original USCIS/immigration documents indicating current lawful immigration status
- · Valid Passport, dependent on status
- Social Security Card or SSA ineligibility letter (must be original; card cannot be laminated)

(Please note: Documents must be original, photo copies will not be accepted.)

To obtain detailed information regarding "identity/residency requirements," you can:

- Visit www.dmv.pa.gov and Enter Search Term "Pub-195NC," and review required documents; or
- Contact us at 1-800-932-4600 or 1-800-228-0676 (TDD)

All documents must show the same name and date of birth, or an association between the information on the documents. Additional documentation may be required, if a connection between documents cannot be established (e.g. Marriage Certificate, Court Order of name change, Divorce Decree, etc).

TO MEET RESIDENCY REQUIREMENTS YOU MUST PRESENT TWO OF THE FOLLOWING (for customers 18 years of age or older)

- · Tax Records
- · Lease Agreements
- Mortgage Documents
- W-2 Form
- Current Weapons Permit (U.S. Citizen only)
- · Current Utility Bills (water, gas, electric, cable, etc.)

--The proof of residency documents must have your name and official Pennsylvania street address on it.--

Note: If you reside with someone, and have no bills in your name, you will still need to provide two proofs of residency. One proof is to bring the person with whom you reside along with their Driver's License or Photo ID to the Driver License Center. You will also need to provide a second proof of residency such as official mail (bank statement, tax notice, magazine etc.) that has your name and physical address on it. The address must match that of the person with whom you reside.

Change your address or renew your driver's license online at www.dmv.pa.gov

SECTION 3709 OF THE VEHICLE CODE

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