

# pennsylvania DEPARTMENT OF TRANSPORTATION APPLICATION FOR PENNSYLVANIA NON-COMMERCIAL DRIVER'S LICENSE BY OUT-OF-STATE NON CDI. DRIVER

	DUI-OF-STATE NON CDL DRIVER			<u>100 W</u>	UST APPLY IN PERS			
A	LAST NAME (S)					JR., ETC.		
	FIRST NAME				MIDDLE NAME			
	DATE OF BIRTH         HEIGHT           MONTH   DAY   YEAR         FEET   INCHES	SOCIAL SECURITY NUMBER	CIAL SECURITY NUMBER			TELEPHONE NUMBER (8:00 a.m. to 4:30 p.m.)		
	MONTH DAT TEAM FEET INCHES							
	EYE COLOR (Please check one): BLUE BROWN	GREEN HAZEL	PINK BLAC	K GRAY	DICHROMATIC	OTHER		
	SEX/GENDER DESIGNATION STATEMENT							
	I, wish the gender designation on my Driver's License/ ID Card to read							
	(PRINT NAME)  MALE (M) FEMALE (F) Non-Binary (X)							
	I hereby certify under penalty of law that this request for the selected gender designation to appear on my Driver's License/ ID Card accurately reflects my gender identity and is not for any fraudulent or other unlawful purpose.							
	STREET ADDRESS: A Post Office Box number may be used in addition to the actual residence address, but cannot be used as the only address.							
	The 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 as identifying 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.							
	ORGAN DONOR DESIGNATION: Pennsylvania strongly supports organ and			·	•		EMOVE	
В								
	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:							
	☐ Impairment or Amputation of an appendage. If so, list:							
	NOTE: Any recommendations/addi			rtificate on a hea	alth care provider's le	tterhead.		
	THIS DEPARTMENT MAY REQUIRE A PHYSICAL EXAMINATION B	Y A PROVIDER OR CAUSE.			Chec	ck Applicable Block YES	NO	
	1. Have you ever held a PA Driver's License/Learner's Permit/ID Card in this or any other name(s)?							
	If yes, State: DL/LP/ID #: State: DL/LP/ID #:	Name if different than a Name if different than a	above: above:					
	If yes, State: DL/LP/ID #: Name if different than above:  State: DL/LP/ID #: Name if different than above:  3. 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?							
	of your driver's license or driving privilege? If yes, give st	ate date	re	ason			$\neg$	
	5. Are you currently required, or have you been cited for a v							
С								
	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 this application is made with my full consent.							
	☐ I do give consent SIGN ☐ I do not give consent for applicant's request for Organ Donor designation.							
		Johor designation.	(SIGNATURE OF PAR	RENT, GUARDIAN, PERSON	IN LOCO PARENTIS OR SPOUSE	AT LEAST 18 YEARS OF AGE - IN INK)		
D	AUTHORIZATION AND CERTIFICATION							
	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 driver's license.							
	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 the information							
	contained herein 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 back for provisions.) <b>WARNING:</b> 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]).							
	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 \$3.00 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)							
			Payable to Per	•	C Driver License	· · · · · · · · · · · · · · · · · · ·	i C)	
	PAID BY: Debit/Credit Card Check	Money Order	Centers do no			TOTAL   \$		
E	EXAM REPORT	COMPLETE A	ALL ITEMS		EXAMINER'S DRIVER			
	VISION SCREENING  CHECK ( / ) YES NO  Uncorrected  Corrected  Corrected  Inis is to certify that the above applicant has applied for and passed the examination for the above class(as) for a Pennsylvania Driver's License							
	Combined vision is 20/40 or better							
	Report of Eye Examination (attached)	20/ Left Eye 20/ Both Ey			(SIGNATURE OF EXAMINER)	(DLE NO	D.)	
	Corrective Lenses	R L Fields	R L	DATE OF ISSUE:	· · · · · · · · · · · · · · · · · · ·	·	- /	
	Other:			MONTH	DAY	YEAR		
	Qualified Without Restrictions	Classes which should		EXAM CENTER:				
		the Driver's PA Licens	e.					
	Former Driver's License # State	A   B	C    M	PA DRIVER'S LICENS	NUMBER:			
	i office briver a close # State	_ <u> </u>		ī				

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

### Out-of-state licenses expired for more than 6 months cannot be transferred.

#### — FEE INFORMATION -

\*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 \$3.00 to the Fund. The additional \$3.00 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 NON-U.S. CITIZENS** You must bring ALL of the following: Social Security Card (must be original; card cannot be laminated) and ONE of • Original USCIS/immigration documents indicating current lawful immigration status · Valid Passport, dependent on status · Birth Certificate with raised seal (U.S. issued by an authorized government • Social Security Card or SSA ineligibility letter (must be original; card cannot be laminated) agency, including U.S. territories or Puerto Rico. No other birth documents will be accepted. (Please note: Documents must be original, photo copies will not be accepted.) · Certificate of U.S. Citizenship (BCIS/INS Form N-560) Certificate of Naturalization (BCIS/INS Form N-550 or N-570) To obtain detailed information regarding "identity/residency requirements," you can: · Valid U.S. Passport (Only valid U.S. Passports and original • Visit www.dmv.pa.gov and Enter Search Term "Pub-195NC," and review required documents will be accepted.) documents; or Note: Your Out-of-State Driver's License must be surrendered at the • Contact us at 717-412-5300. TTY callers - please dial 711 to reach us. time you make application.

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)

- Current, unexpired PA driver's license or photo ID card
- PA vehicle registration card
- Auto insurance card
- A computer-generated utility bill showing your name and address (cellphone, cable, electric, gas)
- Post-marked mail/package labels through USPS, UPS, FedEx etc.
- A W-2 form/pay stub
- Lease agreements or mortgage documents
- Official Tax Records reflecting current name and address

--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 post-marked mail/package labels through USPS, UPS, FedEx 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.