

## PARENTAL CONSENT CANCELLATION OF A MINOR'S DRIVER'S LICENSE

**Purpose:** The custodial parent or guardian of an unmarried or unemancipated minor uses this form to request cancellation of the minor's driving privilege after the minor has been issued a driver's license.

**Instructions:** A minor's parent/guardian completes and submits this form to any DMV Customer Service Center or mails to the CDL/NDR Work Center at the above address. If you have questions, call (804) 497-7100.

**Note:** When DMV receives this signed request, the minor's driver's license will be cancelled in accordance with Virginia Code § 46.2-334.B. **Once this cancellation becomes effective, the minor's driver's license will not be reissued until six months elapse from the date of the cancellation notice, the minor reaches age 18, marries, or becomes emancipated.** Virginia Code does not provide for cancellation of a learner's permit by parental consent.

MINOR INFORMATION				
FULL LEGAL NAME (last)	(first)	(mi)	(suffix)	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> Non-Binary
RESIDENCE ADDRESS (number and street)			DRIVERS LICENSE NUMBER OR SSN	
CITY	STATE	ZIP CODE	BIRTH DATE (mm/dd/yyyy)	

PARENT/GUARDIAN INFORMATION				
One parent must sign this request. In the case of joint legal custody, both parents must sign. If one parent is not reasonably available or does not agree with this cancellation, one of the parents may petition a Juvenile and Domestic Relations Court for a court order directing DMV to cancel the minor's driver's license.				
FULL LEGAL NAME (last)	(first)	(mi)	(suffix)	RELATIONSHIP TO MINOR <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian
RESIDENCE ADDRESS (number and street)		CITY		STATE ZIP CODE
IF AWARDED JOINT LEGAL CUSTODY: NAME (last)	(first)	(mi)	(suffix)	RELATIONSHIP TO MINOR <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian
RESIDENCE ADDRESS (number and street)		CITY		STATE ZIP CODE

CERTIFICATION		
I/We certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/We make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.		
PARENT/GUARDIAN SIGNATURE	TELEPHONE NUMBER	DATE (mm/dd/yyyy)
IF AWARDED JOINT LEGAL CUSTODY: PARENT/GUARDIAN SIGNATURE	TELEPHONE NUMBER	DATE (mm/dd/yyyy)

DMV USE ONLY
REMARKS/DATE STAMP
Send this form to the CDL/NDR Work Center in headquarters.