

**DRIVER LICENSE/ID CARD RENEWAL**

NOTE: This form does not apply to CDL licenses, non-US citizens, or applicants who require testing (driver or vision).

SECTION 1: APPLICANT INFORMATION

FULL LEGAL NAME (Print)		EMAIL	CELL PHONE #	
<input type="checkbox"/> I agree to receive email or text messages concerning KYTC Driver Licensing notifications.				
STREET ADDRESS		CITY	STATE	ZIP
MAILING ADDRESS (if different from street address)		CITY	STATE	ZIP
<i>If change in address, please provide 1 proof of address postmarked within a year. Proofs of address include home utility bill, rental agreement, bank statement, phone bill, etc. See IDOCUMENT GUIDE for complete list of documents.</i>				
DATE OF BIRTH (mm/dd/yyyy)	DRIVER LICENSE #/SSN # (last 4 digits of SSN)		EXPIRATION (mm/dd/yyyy)	

SECTION 2: ITEM & PAYMENT INFORMATION

(Select the item you wish to renew.) *Only 4-year renewals are available via mail-in renewal at this time.*

Testing is required if any Driver/Operator License has been expired for longer than one (1) year.

<input type="checkbox"/> Standard Driver License (\$21.50)	<input type="checkbox"/> Standard Combination Motorcycle & Operator License (\$26.50)
<input type="checkbox"/> Standard ID Card (\$11.50)	<input type="checkbox"/> Standard or Real ID Duplicate/Replacement (\$15.00)-new address documentation required
<input type="checkbox"/> REAL ID Driver License (\$24.00) - only applicable to current REAL ID Driver License holders	
<input type="checkbox"/> REAL ID Identification Card (\$14.00) - only applicable to current REAL ID Identification Card holders	
<input type="checkbox"/> REAL ID Combination Motorcycle & Operator License (\$29.00) - only applicable to current REAL ID Combination Motorcycle & Operator License holders	

Would you like to donate to the Trust for Life Organ Donation Program? No \$2 \$5 \$10 \$25

Form of payment: cash money order check (Make checks payable to Kentucky State Treasurer.)

debit/credit card (A processing fee of 1.5% for debit and 2.75% for credit will be added.)

If paying with a debit/credit card, provide the following information:

NAME ON CARD (exactly as it appears)	CARD #	EXPIRATION (mm/yy)	SECURITY CODE (3 digits on back)
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SECTION 3: APPLICANT STATUS QUESTIONS

1. Are you a U.S. citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
1a. If you are not a U.S. Citizen, are you a Permanent Resident? <input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you suffered a seizure or blackout within the past 90 days? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide the date of your last seizure. _____ / _____ / _____ MM DD YYYY
3. Is your driving privilege suspended or revoked in any state or jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No
4. Do you have any physical/mental impairments that affect your driving abilities or have you had a blackout within the past three (3) years? <input type="checkbox"/> Yes <input type="checkbox"/> No
5. If applying for a duplicate KY license or KY ID card, was said license or ID card lost or stolen? <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Do you currently have a license or identification card from another state or jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No

SECTION 4: APPLICANT ATTESTATION & SIGNATURE

I affirm that I am the person named and described in the KY Drivers Licensing Information System and the statements provided in this application and to the licensing officials are true and correct to the best of my knowledge. I understand that misrepresentation in the licensing process can result in criminal and civil penalties under state and federal law.

APPLICANT SIGNATURE (Sign in black ink or type name.)

DATE

INSTRUCTIONS: Submit this application and payment by mail or drop box located at the below address.

Mail and drop box address: Kentucky Transportation Cabinet, Division of Driver Licensing, 200 Mero Street, Frankfort KY 40622 If you have questions or need assistance with this form please call (502) 564-1257.

If you would like to register to vote, please visit <https://vrsws.sos.ky.gov/ovrweb/>.