



You may qualify to renew your driver license or obtain a duplicate driver license if you are active duty military personnel or dependent and are temporarily out-of-state or country. Please complete this application and submit the required documents in order to receive a Missouri driver license through the mail.

Complete both sides of this application and answer all questions that apply to you.

Last Name		First Name		Middle Name	Suffix	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Missouri Driver License Number		
Missouri Residence Street Address (No PO Boxes) *Required				City		State	ZIP Code	County	
Temporary Mailing Address * Required Field				City		State or Country	ZIP Code	When will you return to Missouri?	
Mail-to Address <input type="checkbox"/> MO Residence <input type="checkbox"/> Out of State <input type="checkbox"/> Out of Country		Last 4 Digits of SSN	Date of Birth / /	Place of Birth (Optional)		Height	Weight	Eye Color	
Select One <input type="checkbox"/> Military <input type="checkbox"/> Military Dependent		E-Mail Address				Phone Number		<input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Other	
<input type="checkbox"/> Yes, I consent to receive notifications from the Department of Revenue by phone, text, or email address as provided during this application.									
Select the type of license you currently hold. (Select only one) *Required Field <input type="checkbox"/> Class A <input type="checkbox"/> Class B <input type="checkbox"/> Class C <input type="checkbox"/> Class E <input type="checkbox"/> Class F <input type="checkbox"/> Class M									
Do you understand that any other driver license in your name is invalid with this application? <input type="checkbox"/> Yes <input type="checkbox"/> No									
Any license, permit or identification card issued in Missouri or any other U.S. jurisdiction will also be invalid with this application.									

Voter Registration

You are required to answer both of the following questions.Are you registered to vote at your current address? ☐ Yes ☐ NoDo you wish to register to vote or update your voter registration application? ☐ Yes ☐ No

If you are registered to vote at your current address, but would like to update your name or other registration information, please indicate yes on the second question above. The office where the registration application was submitted and your decision of whether or not to register will remain confidential and will be used for voter registration purposes only.

The following attestation applies to persons submitting a new or updated voter registration application as part of this license transaction.

I swear under penalty of perjury that all statements made on this card are true to the best of my knowledge and belief. I understand that if I register to vote knowing that I am not legally entitled to register, I am committing a class one election offense and may be punished by imprisonment of not more than five years or by a fine between \$2,500 and \$10,000 or by both such imprisonment and fine.

Certain information provided on this mail in application form may be used for voter registration purposes, unless you opt out. ☐ Opt-Out

The address change you submitted will be used to update your voter registration information unless you opt out by checking this box. ☐ Opt-Out

Your signature serves as an attestation under penalty of perjury that all of the following requirements have been met:

- | | |
|--|---|
| 1. I am a U.S. Citizen. | 5. I am not confined under a sentence of imprisonment. |
| 2. I am a Missouri resident. | 6. I am not on probation or parole after conviction of a felony, until finally discharged. |
| 3. I am at least 17 1/2 years of age (must be 18 to vote). | 7. I have not been convicted of a felony or misdemeanor connected with the right to suffrage. |
| 4. I have not been adjudged incapacitated by a court of law. | |

Commercial Driver License Only

Any person applying for a commercial driver license (CDL) must certify to one of the four categories shown below in the Self-Certification Information block indicating the type of commercial vehicle operation they drive in or expect to drive in with their CDL.

Drivers who select "non-excepted interstate" or "non-excepted intrastate" below must have a valid, unexpired, medical examiner's certificate on file in the National Registry.

I certify my commercial operating status is-check only one box below: (Selecting more than one box will delay processing of this form.)

- ☐ **Non-excepted Interstate** - (NI) Operates or expects to operate in interstate commerce and is subject to and meets the qualification requirements under 49 CFR part 391, and is required to obtain a medical examiner's certificate by 49 CFR 391.45. (Current medical examiner's certificate, and any applicable waiver, must be submitted with this form.)
- ☐ **Non-excepted Intrastate** - (NA) Operates only in intrastate commerce and is required to meet Missouri's current medical requirements. (Current medical examiner's certificate, and any applicable waiver, must be submitted with this form.)
- ☐ **Excepted Interstate** - (EI) Operates or expects to operate in interstate commerce, but engages exclusively in transportation or operations excepted under 49 CFR 390.3(f), 391.2, 391.68, or 398.3 from all or parts of the qualification requirements certificate by 49 CFR 391.45. These exceptions are listed in detail on the Department of Revenue's website at dor.mo.gov/faq/driver-license/cdl-medical-certification.
- ☐ **Excepted Intrastate** - (EA) Operates or expects to operate in intrastate commerce, but engages exclusively in transportation or operations that are excepted from all parts of Missouri's medical requirements. (This is Missouri's grandfather exemption where the driver operates solely in intrastate commerce and had a valid chauffeur's license on or before May 13, 1988.)

Have you been licensed in any other state within the past 10 years? ☐ Yes ☐ No

If yes, please submit a list of those states, your license number, if known, and any alias names that you may have used while licensed in that state.

Ever served on active duty in the United States Armed Forces?

If yes, visit dor.mo.gov/military/ to see the services and benefits DOR offers to all eligible military individuals, or complete the survey at mvc.dps.mo.gov/MoVeteransInformation/Survey/DOR to receive information from the Missouri Veterans Commission. A list of all state agency resources and benefits can be found at veteranbenefits.mo.gov/state-benefits/.

Selective Service (Male applicants age 18-26 years of age)Do you wish to register with the Selective Service? ☐ Yes ☐ No**Boater Identification**Do you wish to add or retain a boater identification indicator to your driver license? ☐ Yes

Boating Safety Education Control Number _____

VeteranDo you wish to add or retain a Veteran indicator on your driver license? ☐ Yes

If yes, acceptable discharge document must be submitted.

Applicant's Signature *(Required)

Physical Signature Only

I hereby certify under penalty of perjury, that all information regarding this transaction, including my residential address furnished pursuant to Sections [302.171](#) and [302.181](#) RSMo is true and accurate. (Signature must be centered in the box and not extend outside the box.)

Sign in the box below. ▼ Black ink only.

Signature Box

Signature Box

Permanent DisabilityDo you wish to add or retain a permanent disability indicator to your driver license? ☐ Yes ☐ No**Blindness Awareness Fund**Would you like to donate a dollar to the Blindness Awareness Program? ☐ Yes ☐ No**DHH**Are you deaf or hard of hearing, and wish to add the "DHH" notation to your driver license? ☐ Yes ☐ No

Please refer to donatelifemissouri.org/ regarding the First Person Consent Organ, Eye, and Tissue donor registry prior to answering the following required questions.

Would you like to donate to the Organ Donor Fund? ☐ Yes ☐ No

If yes, enter donation amount (minimum of \$1.) \$ _____

Do you consent to be listed in the Donor Registry System as an organ, eye and tissue donor? If you are currently in the registry, a "No" response will be your consent to be removed from the registry.

☐ Yes ☐ No

Do you authorize the Organ Donor symbol to be placed on your license or permit?

☐ Yes ☐ No

Appropriate License Fee

☐ Check ☐ Money Order ☐ Credit Card

If you are paying by credit card you must include the following:

Card type:

☐ Discover ☐ Mastercard ☐ American Express ☐ Visa

Card Number: _____ CVV _____

Name on Card: _____

Expiration Date: (MM/YY) ____ / ____

A convenience fee will be charged for credit or debit card transactions.

Medical

Must be completed by applicant

In the past 6 months have you had:

Convulsions, Epilepsy or Blackouts ☐ Yes ☐ NoParalysis ☐ Yes ☐ NoHeart Attack, Stroke, Heart Disease ☐ Yes ☐ NoOther (If yes, please explain) ☐ Yes ☐ NoDo you wish to add or retain a medical notation to your driver license? ☐ Yes ☐ NoPlease mark the below condition that is on the Physician's Statement ([Form 5839](#)):☐ Alzheimers Type Dementia ☐ Autism ☐ Cardiovascular Disease☐ Dementia ☐ Diabetes Mellitus ☐ Drug Allergy ☐ Epilepsy☐ High Blood Pressure ☐ Post Traumatic Stress Disorder☐ Schizophrenia ☐ Speech Impairment (Speech Impaired)**Optional Temporary Driver License/Receipt**

Your physical card will be processed and mailed within 10-15 working days.

Do you require a temporary driver license to be sent to you while receipt of your hard copy document is pending? ☐ Yes ☐ No

If yes, how would you like the copy to be transmitted to you? A fee of \$0.50 may be added to your total for each page electronically transmitted.

☐ Fax Number: _____; or ☐ E-mail _____

Per provisions of the Driver Privacy Protection Act, if you have requested a copy of your temporary document your signature on this form serves as authorization to release the requested document to your attention at the designated fax or email provided in this section. The email provided here may be the same or different from other data collection requirements of this form. If a fax or email is not designated in this section a temporary document will not be transmitted.



Mail-in Driver License Application and Instructions (Active Duty Military Personnel and Military Dependents Only)

Please read all instructions before completing the form. Your mail-in license application will be processed within 7-10 days from the date it is received in our office.

This form is not for use by Missouri drivers who are currently in the State of Missouri. Eligible applicants may apply for renewal or replacement online at mydmv.mo.gov.

This form is also not valid to renew or replace a "valid without photo" (VWP) driver license, except for active duty U.S. military personnel. REAL ID Information:

* Requests for issuance of an initial REAL ID-compliant document must be completed in person.

* You may be issued a REAL ID-compliant license by mail if your current license was issued in-person and you were issued a REAL ID-compliant card.

Incomplete applications will not be accepted. You must submit the following:

- ☐ **Proof of Military Active Duty or Dependent Status (such as photocopy of active duty military or military dependent photo ID, military orders or other documentation of current military status)** - Required for ALL applicants. Note: The vision examination and highway sign recognition test are waived upon proof of status. For otherwise eligible active duty military applicants, if your current license is more than 184 days expired, you must submit proof of active duty military status at the time of license expiration to be eligible for renewal.
 - ☐ **Proof of Identity, Lawful Status, Social Security Number (SSN), Residence Address and Legal Name Change (if applicable)** - You must submit one or more documents from each of the defined categories in the acceptable documents for a REAL ID-compliant or non REAL ID-compliant noncommercial or commercial document at dor.mo.gov/driver-license/issuance/required-documents-checklist.html. Application for a renewal or duplicate card requires submission of proof of identity, proof of Missouri residence address (2 documents if current document is REAL ID-compliant) and proof of mailing address, if different from residence. The printed card will be sent to the mailing address provided. Name change verification may be required if the name on the application or identity verification document differs from the name on your current Missouri license. The alternate mailing address provided is for this application only and will not be retained for future notice Department of Revenue notice purposes. An interactive guide of acceptable documents for renewal of a REAL ID-compliant card may also be found on-line at dor.mo.gov/driver-license/issuance/real-id/interactive-guide.html.
 - ☐ **Appropriate License Fee** - Required for all applicants. Payment may be made by a U.S. cashier's check, money order, traveler's check, personal check or credit card. Make check or money order payable to Missouri Department of Revenue. If payment is to be made by credit card complete the credit card information section within the application form. NOTE: If your driver license is within six months of expiring when the mail-in application is received in our office, the transaction is processed as a renewal.

• Renewal driver license (Age 21-69)	Class F or M = \$33.00	Class E = \$48.00	Class A, B, or C = \$58.00
• Renewal driver license (All other ages)	Class F or M = \$16.50	Class E = \$24.00	Class A, B, or C = \$29.00
• Duplicate of a 6-year driver license	Class F or M = \$25.50	Class E = \$33.00	Class A, B, or C = \$38.00
• Duplicate of a 3-year driver license (Under 21 or 70 and older)	Class F or M = \$16.50	Class E = \$24.00	Class A, B, or C = \$29.00
- Please be sure to write your driver license number on your check or money order. If you have marked on the application that you would like to donate to either or both of the funds, you must add that donation to your fee.
- A convenience fee will be charged for credit or debit card transactions.
- ☐ **Signed Application Form** - Complete all parts of this application and review prior to signing. Your physical signature must appear within the signature box on the opposite page. Digital signatures are not accepted. If you are registering to vote or updating voter registration information with this application, the primary application signature will be used for purposes of voter registration.
 - ☐ **Permanent Disability Indicator** - If you are permanently disabled, you may apply for a permanent disability indicator indicating such status to be placed on the back of your driver or nondriver ID. To have the indicator added to your document, you must submit a Physician's Statement - Permanent Disability Indicator ([Form 5294](#)). If your current license has a permanent disability indicator, you may elect to retain the indicator on your new or renewal document. A new physician's statement is not required to retain a prior indicator.
 - ☐ **DHH Indicator** - If you are deaf or hard of hearing you may request a "DHH" notation to be placed on your driver license by indicating a "Yes" response in the attached application. In the event of an emergency, this notation may allow law enforcement or emergency and medical personnel to readily determine if you are deaf or hard of hearing.
 - ☐ **Boater Identification Indicator** - If you have been issued a boating safety education card by the Missouri State Water Patrol under [Section 306.127, RSMo](#), you may elect to have a boater identification indicator placed on the back of your driver license. To have the indicator added to your document, you must submit the control number from your Boating Safety Education Card and add an additional \$1.00 to your transaction. If your current license has a boater identification indicator, you may elect to retain the indicator on your new or renewal document. There is no additional cost to retain a previously issued indicator.
 - ☐ **Veteran Indicator** - Applicants requesting the "VETERAN" designation must submit one of the following documents to verify veteran status at the time of initial request for the driver license or nondriver ID with the new designation: a U.S. Department of Defense discharge document, otherwise known as a DD Form 214, that shows a discharge status of "honorable" or "general under honorable conditions" that establishes the person's service in the Armed Forces of the United States; a U.S. Uniformed Services Identification Card, otherwise known as a DD Form 2, that includes a discharge status of "retired" or "reserve retired" establishing the person's service in the Armed Forces of the United States; a U.S. Department of Veterans Affairs photo identification card; or a discharge document WD AGO 53, WD AGO 55, WD AGO 53-55, NAVPERS 553, NAVMC 78 PD, NAVCG 553, DD 256MC, or DD 215 form that shows a discharge status of "honorable" or "general under honorable conditions".
 - ☐ **Organ Donor Indicator** - When completing the attached application you will be asked two very important questions to determine your decision to register as an organ, eye and tissue donor; and if you register, your decision to have an organ donor symbol placed on the face of your document. Your decision to become an organ and tissue donor is a private one, so an applicant may also elect to register privately at donatelifemissouri.org/.
 - ☐ **Medical Alert Notation** - Applicants with certain medical conditions may request a medical alert notation to be added to the front of their driver license or nondriver ID. To have the notation added to your document, you must submit a Physician's Statement-Medical Alert Notation ([Form 5839](#)). If your current license has a medical notation, you may elect to retain the indicator on your new or renewal document. A new physician's statement is not required to retain prior indicator.

The completed and signed application form, along with all required supporting documents required may be scanned and sent via email or submitted by fax or mail. Applications submitted without all required data and responses, or without the required supporting documents will not be processed.