



Change of Address Notification by Mail

Use a separate form for each driver or vehicle owner

NRS 483.390 and 483.870

You must go to a DMV office to change the address on your commercial driver's license, driver authorization card, seasonal identification card or if you have an identification card that does not show an expiration date.

Complete this form and mail it to the DMV address noted above with the appropriate fees in the form of a check, money order or debit/credit card authorization (use form ADM-205). Do NOT send cash.

REPRINT – only check this box if you have not received your recently issued DL or ID in the mail.

LAST NAME (PRINT)	FIRST NAME	MIDDLE NAME	SUFFIX	NEVADA DL/ ID NUMBER
PLACE OF BIRTH (STATE AND COUNTRY)		BIRTHDAY (MM/DD/YYYY)		
<input type="checkbox"/> YES, print my mailing address on the front of my card (Except Real ID) – Driver License and ID Card only				
PRIMARY PHYSICAL ADDRESS (PRINCIPAL RESIDENCE)		MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL ADDRESS)		
CITY, STATE, ZIP CODE		CITY, STATE, ZIP CODE		
DAYTIME PHONE NUMBER (Optional)		EMAIL ADDRESS (Optional)		
CITIZEN	Are you a United States citizen?			<input type="checkbox"/> YES <input type="checkbox"/> NO

Change **DRIVER'S LICENSE ADDRESS** or **IDENTIFICATION CARD ADDRESS**: You may change your address through the mail if the DMV has a photo of you on file. If not, you must go to a DMV office to have a photo taken. A new driver's license or ID card will be mailed to you within 10 business days after your application is processed. Please include a \$3.25 card production fee with this application.

Change **DISABLED PARKING PLACARD OR MOTORCYCLE STICKER ADDRESS**: Please complete this information to change the mailing and/or Nevada physical address for a disabled parking placard or motorcycle sticker.

Disabled Placard No. _____ Motorcycle Sticker No. _____

Change **VEHICLE REGISTRATION ADDRESS**: Complete this information to change the mailing and/or Nevada physical address for vehicles registered to you. Registration records will only be updated for the vehicles listed below.

If you would like a registration certificate mailed to you, please include a fee of \$5.00 for each vehicle listed.

\$5.00 for Certificate

 NV Plate Number or VIN Expiration Month/Year Year of Vehicle Make

\$5.00 for Certificate

 NV Plate Number or VIN Expiration Month/Year Year of Vehicle Make

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****NOTE: If you are a US Government employee, active-duty military, or dependent of such person, stationed outside of Nevada DMV and do not have a primary Nevada physical address, please Contact Us for instructions on your address change or voter registration.**

All Automatic Voter Registration submissions will be transmitted to the Secretary of State for processing. You will be mailed a notification from the county registrar to select a party or opt-out.

If you are already registered to vote in Nevada, then your current political party preference will not change. NRS 293.5762

Office Use Only:

Information Updated DL or ID Card Registration Disabled Placard Motorcycle Sticker Voter Address Change
 PDPS/CDLIS Clear Hit

Comments: _____

Automatic Voter Registration Section

ALL DRIVER LICENSE OR ID CARD APPLICANTS ONLY MUST COMPLETE SECTION 1

SECTION 1

VOTER REGISTRATION	Are you 18 years or older?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	Are you currently 17 and would like to preregister? You will be able to vote when you turn 18.		<input type="checkbox"/> YES <input type="checkbox"/> NO
	<p>If you meet eligibility criteria, your voter registration will be transmitted to the Secretary of State (SoS). You will receive a notification from the county registrar allowing you to select a political party or opt-out. For more information regarding voter registration contact your local County Registrar or go to the SoS website: nvsos.gov/sos/elections. Your choice to register to vote or not and the place where you register are confidential and will not affect the assistance or services provided to you by the DMV. (NRS Chapter 293)</p>		
	<p>If applicable, check one of the following: (The Uniformed and Overseas Citizens Absentee Voting Act)</p> <p><input type="checkbox"/> Domestic Military (or military spouse or dependent) on active duty and absent from Nevada voting residence</p> <p><input type="checkbox"/> Overseas Military (or military spouse or dependent) on active duty and absent from Nevada voting residence</p> <p><input type="checkbox"/> Overseas Citizen residing outside the U.S. (not applicable to those traveling/vacationing outside the U.S.)</p>		
	<p>If you are active-duty military residing outside of Nevada and you do not have an active Nevada physical address, indicate which County you would like your voter registration information to be forwarded to. COUNTY: _____</p>		
	<p>Voter registration applications are also available in Spanish and Tagalog and can be found on the DMV website at: https://dmv.nv.gov</p>		
ALL DRIVER LICENSE OR ID CARD APPLICANTS MUST ANSWER THE QUESTIONS BELOW			
SELECTIVE SERVICE	<p>If you were born male and are at least 18 years of age but less than 26 years of age, and DO NOT check the box, you will be registering for Selective Service. You will remain eligible for federal student loans, grants, benefits relating to job training, most federal jobs and, if applicable, citizenship in the United States.</p>		<input type="checkbox"/> NO , I am not eligible or do not wish to register
VETERAN	1	I have a U.S. Armed Forces honorable discharge and wish to have a veteran designation placed/retained on my license. If your card does not already have a veteran designation, you must present proof of honorable discharge.	<input type="checkbox"/> YES <input type="checkbox"/> NO
	2	Have you ever served on active duty in the Armed Forces of the United States and separated from such service under conditions other than dishonorable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	3	Have you ever been assigned to duty for a minimum of 6 continuous years in the National Guard or a reserve component of the Armed Forces of the United States and separated from such service under conditions other than dishonorable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
	4	Have you ever served the Commissioned Corps of the United States Public Health Service or the Commissioned Corps of the National Oceanic and Atmospheric Administration of the United States in the capacity of a commissioned officer while on active duty in defense of the United States and separated from such service under conditions other than dishonorable?	<input type="checkbox"/> YES <input type="checkbox"/> NO
ORGAN DONOR	Would you like to be an organ donor and have that indicated on your license or identification card?		<input type="checkbox"/> YES <input type="checkbox"/> NO
	If you would you like to donate \$1 or more to the anatomical gift account, indicate how much here: \$ _____		

I hereby certify, under penalty of perjury, that all statements in this application are true and correct. I attest that I am a legal resident of Nevada. I understand that any misstatement of facts on this application may cause the cancellation or denial of my driver's license pursuant to **NRS 483.420**. "I swear or affirm I am a U.S. citizen. I will be at least 18 years old by the date of the next election, or I am at least 17 years old. I will have continuously resided in Nevada at least 30 days in my county and at least 10 days in my precinct before the next election at which I intend to vote. The physical address listed herein is my sole legal place of residence and I claim no other place as my legal residence. If I am preregistering to vote, I understand and acknowledge that I will be deemed to have registered to vote as of the date of my 18th birthday unless my preregistration is cancelled by any of the means or for any of the reasons for cancelling voter registration pursuant to **Chapter 293** of the **Nevada Revised Statutes**. I am not currently serving a term of imprisonment for a felony conviction. I declare under penalty of perjury that the foregoing is true and correct."

Applicant Name _____ DL/ID Number _____

Applicant Signature _____ Date _____