



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

AGENCY NUMBER

APPLICATION NUMBER

**APPLICATION INFORMATION FOR STANDARD
OHIO DRIVER LICENSE OR ID CARD**

Applicants are required to complete Column A of this form in order to apply for the following: Ohio Driver License (DL) [includes Commercial, Operator, Motorcycle Only, Moped, or Motor Scooter], Ohio Identification Card (ID) [includes Temporary or Permanent], and Ohio Temporary Instruction Permit Identification Card (TIPI) [includes all classes]. Applicants must present acceptable documents.

BMV USE ONLY - Check the following box(es) that applies:

- | | |
|---|---|
| <input type="checkbox"/> Ohio DL / ID / TIPI has never been issued or is expired over 6 months | <input type="checkbox"/> Request a change/correction to Name, Date of Birth, Social Security Number, or License Number as permitted |
| <input type="checkbox"/> Ohio DL / ID / TIPI was lost, stolen, damaged, destroyed, suspended, or confiscated (Ohio DL / ID / TIPI is not presented) | <input type="checkbox"/> Non-U.S. Citizens must present all legal presence documentation OR an I-551, except U.S. Nationals |
| <input type="checkbox"/> Converting to Ohio DL from another state/country | <input type="checkbox"/> Naturalization: Recently Naturalized |

COLUMN A

**Applicants must complete all of column A.
MUST WRITE FULL LEGAL NAME**

FIRST NAME		
FULL MIDDLE NAME		
CURRENT LAST NAME	SUFFIX	
RESIDENCE ADDRESS (No P.O. Box permitted)	APT/UNIT#	
CITY		
STATE	ZIP	
SHIP CARD TO - ADDRESS (if different than listed above)	APT/UNIT#	
CITY	STATE	ZIP
DATE OF BIRTH (MM/DD/YYYY)	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	
SOCIAL SECURITY NUMBER		
HEIGHT	WEIGHT	
HAIR COLOR	EYE COLOR	
TELEPHONE NUMBER ()		
E-MAIL ADDRESS		

LEGAL PRESENCE IN UNITED STATES

- ☐ U.S. CITIZEN
☐ U.S. NATIONAL (NON-U.S. CITIZEN)
☐ PERMANENT RESIDENT (NON-U.S. CITIZEN)
☐ TEMPORARY RESIDENT (NON-U.S. CITIZEN)
Country of Citizenship _____

**WARNING: IT IS A CRIMINAL OFFENSE TO GIVE
FALSE INFORMATION ON THIS APPLICATION.**

Under penalty of law, I affirm that the above information is true to the best of my knowledge and belief.

COLUMN B (BMV USE ONLY)

Applicants must present documents to prove the 5 elements. If applying for a duplicate or renewal, one document is acceptable when all conditions are met.

PROOF OF NAME, DOB, AND U.S. CITIZENSHIP

- | | |
|---|--|
| <input type="checkbox"/> Original or Certified Birth Record (state) _____ | <input type="checkbox"/> U.S. Naturalization Document |
| <input type="checkbox"/> U.S. Passport / Passport Card Exp. Date _____ | <input type="checkbox"/> ODRC I.D. Card |
| | <input type="checkbox"/> ODYS I.D. Card |
| | <input type="checkbox"/> Consular Report of Birth Abroad |

U.S. NATIONAL PROOF OF NAME, DOB, AND LEGAL PRESENCE

- | | |
|---|--|
| <input type="checkbox"/> Original or Certified Birth Record (territory) _____ | <input type="checkbox"/> U.S. Passport / Passport Card Exp. Date _____ |
| <input type="checkbox"/> Consular Report of Birth Abroad | Endorsement Page Number _____ |

PROOF OF NAME CHANGE (if applicable)

- ☐ Divorce Doc ☐ Marriage Doc ☐ Certified Copy of Court Ordered Name Change

ONE DOCUMENT TRANSACTION

(Specify Document) _____

PROOF OF SSN

- ☐ SS Card ☐ W-2 ☐ 1099 ☐ Pay Stub ☐ BMV 2161 (not SS eligible)
☐ Other (specify) _____

NON-U.S. CITIZEN-Proof of Name, DOB & Legal Presence

- | | |
|--|---|
| <input type="checkbox"/> Permanent Resident Card (I-551) | <input type="checkbox"/> Conditional Resident (I-551T) |
| <input type="checkbox"/> Employment Authorization Card (I-766) | <input type="checkbox"/> Unexpired Foreign Passport |
| <input type="checkbox"/> VISA (type / class) _____ | <input type="checkbox"/> I-20 <input type="checkbox"/> OPT / CPT <input type="checkbox"/> DS-2019 |
| <input type="checkbox"/> I-94 | <input type="checkbox"/> I-797 _____ <input type="checkbox"/> PPR (case type) |
| <input type="checkbox"/> Other (specify) _____ | |
| Legal Presence Document Exp. Date (Mandatory) _____ | |

PROOF OF OHIO STREET ADDRESS (No P.O. Box)

- ☐ No Address Change ☐ Document (specify) _____
☐ Declared - Ohio DL / ID is unexpired or expired less than 6 mos (Excludes Temp Residents)

☐ **NON-OHIO LICENSE OR ABSTRACT**

BASS SYSTEM DATA MATCH

- ☐ NEW / OSC (No Data in System)
☐ Name
☐ DOB
☐ SS Number

BASS PHOTOGRAPH

- ☐ No Photograph in BASS
☐ BASS Photograph Match
☐ BASS Photograph Mismatch (must complete investigative review)

DISCREPANCY ☐ Name ☐ DOB ☐ SS Number

DOCS. FOR RESOLUTION _____

SIGNATURE OF APPLICANT (Must be signed in front of the processing employee)

DATE

X

SIGNATURE OF PROCESSING EMPLOYEE

*SIGNATURE OF REVIEWER

X

X

*If processing employee is not a Deputy Registrar or supervisor, reviewer must be a Deputy Registrar or supervisor.

If applicant is assisted with completing this form, print name of assistant and their DL / ID number, if available: _____



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

AGENCY NUMBER

APPLICATION NUMBER

**APPLICATION INFORMATION FOR COMPLIANT
OHIO DRIVER LICENSE OR ID CARD**

Applicants are required to complete Column A of this form in order to apply for the following: Ohio Driver License (DL) [includes Commercial, Operator, Motorcycle Only, Moped, or Motor Scooter], Ohio Identification Card (ID) [includes Temporary or Permanent], and Ohio Temporary Instruction Permit Identification Card (TIPI) [includes all classes]. Applicants must present acceptable documents.

BMV USE ONLY - Check the following box(es) that applies:

- ☐ **Compliant Ohio DL / ID / TIPI** has never been issued or is expired over 6 months
- ☐ **Ohio DL / ID / TIPI** was lost, stolen, damaged, destroyed, suspended, or confiscated (Ohio DL / ID / TIPI is not presented)
- ☐ **Converting to Compliant Ohio DL** from another state/country
- ☐ **Request a change/correction** to Name, Date of Birth, Social Security Number, or License Number as permitted
- ☐ **Non-U.S. Citizens** must present all legal presence documentation **OR** an I-551, except U.S. Nationals
- ☐ **Naturalization:** Recently Naturalized

COLUMN A

**Applicants must complete all of column A.
MUST WRITE FULL LEGAL NAME**

FIRST NAME		
FULL MIDDLE NAME		
CURRENT LAST NAME	SUFFIX	
RESIDENCE ADDRESS (No P.O. Box permitted)	APT/UNIT#	
CITY		
STATE	ZIP	
SHIP CARD TO - ADDRESS (if different than listed above)	APT/UNIT#	
CITY	STATE	ZIP
DATE OF BIRTH (MM/DD/YYYY)	SEX <input type="checkbox"/> Male <input type="checkbox"/> Female	
SOCIAL SECURITY NUMBER		
HEIGHT	WEIGHT	
HAIR COLOR	EYE COLOR	
TELEPHONE NUMBER ()		
E-MAIL ADDRESS		

LEGAL PRESENCE IN UNITED STATES

- ☐ U.S. CITIZEN
- ☐ U.S. NATIONAL (NON-U.S. CITIZEN)
- ☐ PERMANENT RESIDENT (NON-U.S. CITIZEN)
- ☐ TEMPORARY RESIDENT (NON-U.S. CITIZEN)
- Country of Citizenship _____

COLUMN B (BMV USE ONLY)

Applicants must present documents to prove the 5 elements. If applying for a duplicate or renewal, one document is acceptable when all conditions are met.

PROOF OF NAME, DOB, AND U.S. CITIZENSHIP

- ☐ Original or Certified Birth Record (state) _____
- ☐ U.S. Naturalization Document
- ☐ U.S. Passport / Passport Card
- ☐ I-797 Case Type I-565
- ☐ Consular Report of Birth Abroad
- ☐ Exp. Date _____

U.S. NATIONAL PROOF OF NAME, DOB, AND LEGAL PRESENCE

- ☐ Original or Certified Birth Record (territory) _____
- ☐ U.S. Passport / Passport Card
- ☐ Consular Report of Birth Abroad
- ☐ Exp. Date _____
- ☐ Endorsement Page Number _____

PERMANENT RESIDENT – Proof of Name, DOB, and Legal Presence

- ☐ Permanent Resident (I-551) ☐ Conditional Resident (I-551T) Exp. Date _____

TEMPORARY RESIDENT – Proof of Name, DOB, and Legal Presence

Applicant must present documents from each column (cannot be the same document in both columns, supplemental document must be verifiable through SAVE)

Main Document

- ☐ Employment Authorization Card (I-766)
- ☐ Unexpired Foreign Passport
- Visa Type _____
- With I-94 _____
- ☐ Compliant Ohio DL/ID/TIPI
- Exp. Date _____

Supplemental USCIS Document

- ☐ Employment Authorization Card (I-766)
- ☐ I-94
- ☐ I-20 ☐ OPT/CPT ☐ DS-2019
- ☐ I-797 _____ ☐ PPR
- Case type _____
- ☐ Other (specify) _____
- Exp. Date _____

PROOF OF NAME CHANGE (if applicable)

- ☐ Divorce Doc ☐ Marriage Doc ☐ Certified Copy of Court Ordered Name Change

PROOF OF SSN

- ☐ SS Card ☐ W-2 ☐ 1099 ☐ Pay Stub

PROOF OF OHIO STREET ADDRESS (No P.O. Box)

- ☐ Document 1 ☐ Document 2
- ☐ No Address Change ☐ Declared – Compliant Ohio DL / ID is unexpired or expired less than 6 mos.

ONE DOCUMENT TRANSACTION

(Specify Document) _____

☐ **NON-OHIO LICENSE OR ABSTRACT**

BASS SYSTEM DATA MATCH

- ☐ NEW / OSC (No Data in System)
- ☐ Name ☐ DOB
- ☐ SS Number

BASS PHOTOGRAPH

- ☐ No Photograph in BASS
- ☐ BASS Photograph Match
- ☐ BASS Photograph Mismatch (must complete investigative review)

DISCREPANCY ☐ Name ☐ DOB ☐ SS Number

DOCS. FOR RESOLUTION _____

WARNING: IT IS A CRIMINAL OFFENSE TO GIVE FALSE INFORMATION ON THIS APPLICATION. Under penalty of law, I affirm that the above information is true to the best of my knowledge and belief.

SIGNATURE OF APPLICANT (Must be signed in front of the processing employee)		DATE
X		
SIGNATURE OF PROCESSING EMPLOYEE	*SIGNATURE OF REVIEWER	
X	X	

*If processing employee is not a Deputy Registrar or supervisor, reviewer must be a Deputy Registrar or supervisor.

If applicant is assisted with completing this form, print name of assistant and their DL / ID number, if available: _____