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| Seal BMV-small | OHIO DEPARTMENT OF PUBLIC SAFETY  BUREAU OF MOTOR VEHICLES  **APPLICATION INFORMATION for standard**  **OHIO DRIVER LICENSE or ID CARD** | | Agency Number |
| APPLICATION NUMBER |
| 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 (TIPIC) [includes all classes]. Applicants must present acceptable documents. | | | |
| **BMV USE ONLY - Check the following box(es) that applies:** | | | |
| **Ohio DL / ID / TIPIC** has never been issued or is expired over 6 months  **Ohio DL / ID / TIPIC** was lost, stolen, damaged, destroyed, suspended, or confiscated (Ohio DL / ID / TIPIC is not presented)  **Converting to 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 | |

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| **COLUMN A**  **Applicants must complete all of column A.**  **MUST WRITE FULL LEGAL NAME** | | | |
| First Name | | | |
| Full Middle NAME | | | |
| CURRENT LAST NAME | | | |
| RESIDENCE ADDRESS (No P.O. Box permitted) | | | |
| City | | | |
| STATE | Zip | | |
| SHIP CARD TO - ADDRESS (if different than listed above) | | | |
| City | state | | zip |
| date of birth (MM/DD/YYYY) | Gender  Male  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** | | | | |
| Original or Certified Birth Record  (state)  U.S. Passport / Passport Card  Exp. Date | | U.S. Naturalization Document  ODRC I.D. Card  ODYS I.D. Card  Consular Report of Birth Abroad | | |
| **U.S. NATIONAL PROOF OF NAME, DOB, AND LEGAL PRESENCE** | | | | |
| Original or Certified Birth Record  (territory)  Consular Report of Birth Abroad | | U.S. Passport / Passport Card  Exp. Date  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 CardW-2 1099 Pay Stub BMV 2161 (not SS eligible)  Other (specify) | | | | |
| **NON-U.S. CITIZEN-Proof of Name, DOB & Legal Presence**  Permanent Resident Card (I-551)  Conditional Resident (I-551T) | | | | |
| Employment Authorization Card (I-766)  Unexpired Foreign Passport | | | | |
| VISA (type / class)  I-20  OPT / CPT  DS-2019 | | | | |
| I-94  I-797  PPR | | | | |
| (case type) | | | | |
| 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** | | **BASS PHOTOGRAPH** | | |
| NEW / OSC (No Data in System)  Name  DOB  SS Number | | No Photograph in BASS  BASS Photograph Match  BASS Photograph Mismatch (must complete investigative review) | | |
| **DISCREPANCY**  Name  DOB  SS Number | | | | |
| DOCS. FOR RESOLUTION | | | | |

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| Signature of Applicant (Must be signed in front of the processing employee)  **X** | | Date |
| Signature of Processing Employee  **X** | \*Signature of REVIEWER  **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:** | | |

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| Seal BMV-small | OHIO DEPARTMENT OF PUBLIC SAFETY  BUREAU OF MOTOR VEHICLES  **APPLICATION INFORMATION for compliant**  **OHIO DRIVER LICENSE or ID CARD** | | Agency Number |
| APPLICATION NUMBER |
| 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 (TIPIC) [includes all classes]. Applicants must present acceptable documents. | | | |
| **BMV USE ONLY - Check the following box(es) that applies:** | | | |
| **Compliant Ohio DL / ID / TIPIC** has never been issued or is expired over 6 months  **Ohio DL / ID / TIPIC** was lost, stolen, damaged, destroyed, suspended, or confiscated (Ohio DL / ID / TIPIC 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 | |

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| **COLUMN A**  **Applicants must complete all of column A.**  **MUST WRITE FULL LEGAL NAME** | | |
| First Name | | |
| Full Middle NAME | | |
| CURRENT LAST NAME | | |
| RESIDENCE ADDRESS (No P.O. Box permitted) | | |
| City | | |
| STATE | Zip | |
| SHIP CARD TO - ADDRESS (if different than listed above) | | |
| City | state | zip |
| date of birth (MM/DD/YYYY) | Gender  Male  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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |

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| **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. Passport / Passport Card  Exp. Date | U.S. Naturalization Document  I-797 Case Type I-565  Consular Report of Birth Abroad | |
| **U.S. NATIONAL PROOF OF NAME, DOB, AND LEGAL PRESENCE** | | |
| Original or Certified Birth Record  (territory)  Consular Report of Birth Abroad | U.S. Passport / Passport Card  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** | | **Supplemental USCIS Document** |
| Employment Authorization Card (I-766)  Unexpired Foreign Passport  Visa Type  With I-94  Compliant Ohio DL/ID/TIPIC  Exp. Date | | 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 | | |

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| **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)  **X** | | Date |
| Signature of Processing Employee  **X** | \*Signature of REVIEWER  **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:** | | |