



DRIVER LICENSE/ID CARD RENEWAL

NOTE: This form is NOT for current CDL or permit holders, non-US citizens, name changes, new Real ID applicants, military renewing by mail (form TC 94-28), or applicants who are suspended or require testing (driver or vision).

SECTION 1: APPLICANT INFORMATION

FULL LEGAL NAME (Print)		EMAIL	CELL PHONE #	
STREET ADDRESS		CITY	STATE	ZIP
MAILING ADDRESS (if different from street address)		CITY	STATE	ZIP
DATE OF BIRTH (mm/dd/yyyy)	DRIVER LICENSE #/SSN # (last 4 digits of SSN)		EXPIRATION (mm/dd/yyyy)	

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.

SECTION 2: 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 longer than 5 years, unless license is currently suspended.
- Driver License or ID Card Duplicate/Replacement (\$15.00)-Change of address/Lost or Stolen/Current Expiration **not** within 6 months
 - Standard Driver License Renewal (\$21.50) - Expiration date on current license **must** be within 6 months
 - Standard ID Card (\$11.50) - Expiration date on current card **must** be within 5 months
 - Standard Combination Motorcycle & Operator License (\$26.50) - Expiration date on current license **must** be within 6 months
 - REAL ID Driver License (\$24.00) - **ONLY** applicable to current REAL ID Driver License holders
 - REAL ID Identification Card (\$14.00) - **ONLY** applicable to current REAL ID Identification Card holders-expiration date within 5 months
 - 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/yyyy)	SECURITY # (3 digits on back)
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SECTION 3: APPLICANT STATUS QUESTIONS

1. Are you a U.S. citizen?	Yes	No	If no, are you a Permanent Resident?	Yes	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:

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/>.