

Change of Address for Driver License or REAL ID

Application

P.O. Box 201430 Helena, MT 59620-1430 • Phone (406) 444-3933 • Fax (406) 444-1631 • DriverLicense@mt.gov • dojmt.gov

Montana law mandates that t address has changed from wh	hat is currently on your d	driver license, please fill	I out this form and in	nclude it with your	
application. Current REAL ID Do you currently hold a R		o proofs of new residen Yes 🗆 No	tial address with this	form.	
If yes, have you included			form? Yes No		
Please follow link for list of ac	cceptable proof of resider	ncy forms https://mtre	alid.gov/required-doc	cs/	
Legal Last Name	Legal First Name	Legal Middle Nai	me Suffix (J	Suffix (Jr., Sr., 1 St , etc.)	
Date of Birth (mm/dd/yyyy)	Montana Driver Licens	se # Current Daytime	Phone # Email A	# Email Address	
Montana Residential Address		City	State	Zip Code	
Montana Mailing Address		City	State	Zip Code	
I affirm under penalty of lav best of my knowledge, infor		t the information on thi	is application is true	and correct to the	
SignatureDate					
Voter Registration: Please be sure to sign and date this section of the application.					
\square I want to register to vote or update my voter application (continue with application if selected)					
\square I do not want to register to vote (end of application if selected)					
\square I am already registered to vote and do not want to update my information (end of application if selected)					
County you reside in:					
Are you a citizen of the United States?					
Will you be at least 18 years of age on or before the next election? \square Yes \square No					
Will you be a Montana resident for at least 30 days before the next election? \square Yes \square No					
If you checked "No" in response to any of these questions, this is the end of the application. Please sign and date.					
Previous Registration Information – will be used to provide cancellation information to former jurisdiction. Required if name changed or if previously registered to vote in another MT county or in another state.					
Previous Registration Name Res		Residence Address of Pre	esidence Address of Previous Registration		
Previous City Prev	vious County	Previous State	Previous Zip Code		
Receive Your Ballot in the Mail					
☐ Yes, I request an abs reside at the address listed Service, I must complete, s		derstand that if I file a	change of address wi	ith the U.S. Postal	
Voter Applicant Affirmation	on				
I affirm under penalty of pe States, that I will be at leas at least 30 days prior to the been found to be of unsoun may be subject to a fine or Vehicle Division to use your	st 18 years old on or before next election, and that and mind by a court. I und imprisonment, or both,	ore the next election, the I am not serving a felon derstand that if I have gounder federal and/or st	nat I will have been a ony conviction in a pe given false informatio cate law. By signing y	a resident of Montana for enal institution nor have on on this application, I	
Signature:		Date:			
The affirmation on this application from being p		ion must be signed by t	he applicant. Failure:	to do so will prevent	
Where you submit this form registration purposes.	and your decision to not	vote is confidential, an	d this information ca	n only be used for voter	

You can visit the Montana Secretary of State "My Voter Page" to check if you are registered to vote, check your voter registration address, and find the location and directions to your polling place at: https://app.mt.gov/voterinfo/