NEW YORK STATE OF OPPORTUNITY. Department of Motor Vehicles	VEHI	CLE ESCORT DRIVER	APPLICATION dmv.ny.gov				
PLEASE PRINT WITH BLUE OR BLACK INK IN THE BOXES							
Note: To become a certified ve • Have a valid driver • Be at least 21 year	hicle escort driver, you <i>MUST:</i> license • Pay a \$40 fee	 Present proof of ID (as listed on ID-44) 					
Action Wanted: Driginal Ce	ertification 🛛 Renewal	Replace Certificate	Amend Certification				
 Note: If you are a New York licensed driver and need to change your name and/or address, you must notify DMV of any change BEFORE you submit this application to the Bus Driver Unit. If you are applying for a replacement or need to change your name and/or address on your certificate, complete this form and mail it to: NYS Department of Motor Vehicles, Bus Driver Unit, 6 Empire State Plaza, Room 331, Albany, New York 12228. A \$5.00 check (payable to the Commissioner of Motor Vehicles) is required for a replacement certificate. 							
If you are applying for a renewal, complete this form and mail it to: Department of Motor Vehicles , 207 Genesee Street , Utica , NY 13501-2874. A \$40 check (payable to <i>Commissioner of Motor Vehicles</i>) is required for a renewal. Name of Applicant (<i>Last, First, Middle</i>)							
Phone Number (Include area cod	de) Date of Birth S	ex Height	Eye Color				
State/Province of driver license Driver License Number Driver License Number Client ID number as it appears on your NYS Vehicle Escort card (if available)							
Address Where You Get Your Mail (Include Street Number and Name, Rural Delivery, and/or Box) Apt. #							
City or Town County							
Address Where You Live - If different from your mailing address (Include Street Number and Name, Rural Delivery, and/or Box) Apt. #							
City or Town	Sta	te Zip Code	County				
Address Change for: Address Legal Address							
Does any of the information Name Change: Print your former name exactly as it appears on your escort certificate							
on your Escort Certificate have to be changed? Yes Other Change: What is the change and the reason for it (wrong date of birth, etc.)?							
				I state that the information I have given on this application is true to the best of my knowledge. I certify that I am the holder of a valid driver license that is not now suspended or revoked, and that I have not lost my privilege to drive in New York State.			
				SIGN HERE X			
DMV USE ONLY							
Expiration	Proof Submitted:	Approved					
Date Fee	Driver License/ID	By Office	Date:				

MV-65 (5/22)