

DRIVER'S LICENSE NUMBER

## REQUEST FOR CANCELLATION OF DRIVER'S LICENSE OR LEARNER'S PERMIT

LAST NAME

Bureau of Driver Licensing • P.O. Box 68272 • Harrisburg, PA 17106-8272 717-412-5300

JR/ETC

## PLEASE PRINT OR TYPE ALL INFORMATION, PART I & II - ATTACH LICENSE AND RETURN

	FIRST NAME								MIDDLE NAME				
	DATE OF	DATE OF BIRTH (must be listed) TELEPHON			NE NUMBER			E-MAIL A	ADDRESS (if applicable)				
	Month								_ main bot cos (in applicable)				
	ADDRESS	S CHANGE - A Post Office Box number may be used in addition to the actual residence address, but cannot be used as the only address.											
	NEW	NEW STREET											
	ADDRESS												
	CITY									STATE	ZIP CODE		
	This ap	plication	tion will also serve as a request to update your voter registration unless you check this box:										
	If you a	are not registered to vote, you will receive an application to register. You <u>must be a U.S. citizen</u> to register to vote in Pennsylvania.											
	OUT-	-OF-STATE ADDRESS CHANGE.											
We may not issue driver license products to an out-of-state address, except in the case of an out-of-state address, except in the case of an out-of-state address.													
	of federal or state government, armed forces personnel, or their families, whose workplace is located outsid Pennsylvania. If this exception applies to you, please check the appropriate box and include documentation your status with this application.												
	Attach a letter from your employer on their letterhead to document your status, or attach a copy of your current Photo ID issued by your employer. If you are the immediate family of a person meeting one of th allowable exceptions, attach the documentation of the person employed. Additionally, you must indicate relationship to that person.										copy of your		
											your		
		I certify that my workplace is located out of state and I am employed by, or am the immediate family of a										2	
		person employed by:											
		US Armed Forces Federal Government Pennsylvania State Government											
Relationship to person meeting exemption (check one):   Spouse Dependent Ch									Child	hild			
II.	CANC	ELLAT	ION OF	DRIVE	R'S LICENSE (	WITHDRAW	AL PAREI	NTAL C	ONSEN	NT)			
		CANCELLATION OF DRIVER'S LICENSE (WITHDRAWAL PARENTAL CONSENT)  The person who has signed the application for a driver's license or learner's permit of a person under the age of 1 may request that the driver's license or learner's permit be cancelled by completing and returning this form.  It is understood that:  A driver's license or learner's permit will be reissued only:  1. If a parent with whom the minor resides, the guardian or person in loco parentis, or the minor's spouse consents to reissuance (the person consenting must be over 18 years of age); or											
	It is ur												
	A drive												
												ise	
	2. The minor has reached age 18.												
		Please note: Withdrawal of parental consent resulting in the cancellation of a driver's license will not be accepted toward serving an indefinite or term suspension, recall, cancellation or revocation.										not	
		If using a Messenger Service, I hereby authorize PennDOT to furnish them with the applicant's driving record fo purpose of processing this form.									for the		
	SIGN	(181-18112)								_			
	HERE	(IN INK)					DATE:						