



APPLICATION FOR CHANGE / CORRECTION / REPLACEMENT OF IGNITION INTERLOCK LIMITED LICENSE (IILL)

Bureau of Driver Licensing • P.O. Box 68273 • Harrisburg, PA 17106-8273

CHECK APPLICABLE BOX

REPLACEMENT (DUPLICATE) Complete Sections A, B, D, (C if applicable) CHANGE OR CORRECTION Complete Sections A, B, D (C if applicable)

Section A: CURRENT IGNITION INTERLOCK LIMITED LICENSE (Type or print information). Includes fields for LAST NAME, JR. ETC., FIRST NAME, MIDDLE NAME, DATE OF BIRTH, LICENSE NUMBER, LICENSE EXPIRATION DATE, and TELEPHONE NUMBER.

Section B: APPLICATION FOR REPLACEMENT (Check one) and REASON FOR REPLACEMENT (Check one). Includes checkboxes for camera card, photo license, lost, mutilated, stolen, correction, and never received.

Section B: Pennsylvania strongly supports organ and tissue donation because of its life-saving and life-enhancing opportunities. Includes organ donor designation options: ADD or REMOVE.

THIS AREA IS FOR CHANGES OR CORRECTIONS ONLY - (Only fill in the information you want to change or correct) ADDRESS CHANGE

Section B: ADDRESS CHANGE. Includes instructions for street address and fields for CITY, STATE, and ZIP CODE.

Section B: This application will also serve as a request to update your voter registration unless you check this box: If you are not registered to vote, you will receive an application to register. You must be a U.S. citizen to register to vote in Pennsylvania.

Section B: OUT-OF-STATE ADDRESS CHANGE. Drivers license products cannot be issued to an out-of-state address, except in the case of an employee of federal or state government, armed forces personnel, or their families.

Section B: 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. I certify that my workplace is located out of state and I am employed by, or am the immediate family of a person employed by:

Section B: Relationship to person meeting exemption (check one): US Armed Forces, Federal Government, PA State Employment, Spouse, Dependent Child.

Section B: NAME CHANGE Reason for Change: (Please note all name changes must be done in person with original documents) Marriage, Divorce, Other (see reverse side)

Section B: NAME CHANGE fields for LAST NAME, JR. ETC., FIRST NAME, MIDDLE NAME, OTHER CHANGES, EYE COLOR, DATE OF BIRTH, HEIGHT.

Section C: MUST BE COMPLETED IF APPLICANT IS UNDER THE AGE OF 18 APPLYING FOR ORGAN DONOR DESIGNATION

Section C: I hereby certify that I am Parent, Guardian, Person in Loco Parentis or Spouse at least 18 years of age, of the applicant named herein, that the statements made herein are true and correct to the best of my knowledge and that this application is made with my full consent.

Section D: ACKNOWLEDGEMENT. Includes text for Veterans Designation, contribution options, SIGN HERE, WARNING, PAID BY, and SIGN IN PRESENCE OF NOTARY.

*AFFIDAVIT: This section must be notarized when applying for replacement of a Camera Card. You are entitled to a free replacement ONLY if this application is completed within 90 days of the original date of issuance and the original was never received due to loss in the mail.

SUBSCRIBED AND SWORN TO BEFORE ME: MO. DAY YEAR. Signature of Person Administering Oath. SIGN IN PRESENCE OF NOTARY.

REPLACEMENT DUE TO:	FEE	ITEM(S) SENT
Lost Camera Card	\$5.00 \$10.00 with Motorcycle	Camera Card
Lost License	\$37.50 \$42.50 with Motorcycle	Duplicate License
Mutilated/Damaged	\$37.50 \$42.50 with Motorcycle	Duplicate License
Correction/Change	\$37.50 \$42.50 with Motorcycle	Duplicate License
Never Received	Free if application is completed within 90 days of the original date of issuance	Replacement License

Veterans Designation: You have the opportunity to add the veterans designation to your driver's license, which clearly indicates you are a veteran of the United States Armed Forces. To qualify, you must have served in the United States Armed Forces, including a reserve component or the National Guard, and have been discharged or released from such service under conditions other than dishonorable. If you are requesting to add the veterans designation to your license, make sure you check the box at the top in Section D.

Organ Donation Awareness Trust Fund (ODTF): You have the opportunity to contribute \$3.00 to the Fund. The additional \$3.00 contribution must be added to your payment. You must also check the block provided to ensure proper handling of your contribution. The ODTF provides for the development and implementation of donor awareness programs and funds shall be appropriated subject to the approval of the Governor.

Veterans' Trust Fund (VTF): You have the opportunity to make a tax deductible contribution to the VTF. Your contribution will help support programs and projects for Pennsylvania veterans and their families. Since this additional \$5.00 is not part of the fee, please add the donated amount to your payment. Also, please check the proper block on the form to ensure your contribution is handled properly.

NAME CHANGE - If you desire to use your birth name, you must present a copy of your state issued birth certificate with a raised seal. If your name changed by permission of court, you must present a Certified Copy of the Court Order. If you desire to use your spouse's surname, you must present your marriage certificate. If you desire to use another name, you must present your Social Security Card, together with two other sources issued in the desired name such as: Tax Records, Selective Service Card, Voter Registration Card, Passport, any form of Photo I.D. issued by a governmental agency, banking records, or baptismal certificate.

To report errors on your driver's license relating to name, date of birth or social security number, please contact PennDOT's Customer Care Center at 717-412-5300.

If you are required to present supporting documentation to correct your record, all documents must be originals and presented in person at a PennDOT Driver License Center.

- For **NAME** corrections, you must present your state issued birth certificate with a raised seal, a Certified Copy of the Court Order or your marriage certificate.
- For **DATE OF BIRTH** corrections, you must present state issued birth certificate with raised seal.
- For **SOCIAL SECURITY NUMBER** corrections, you must present your Social Security Card.

***Note: All name changes must be made in person at a Driver License Center. All documents must be original.**

If you find your original license after you have submitted this application for a duplicate, return the original license with a letter of explanation to the address shown below. After a duplicate is issued, the original license is no longer valid.

Once you have completed the application, send a check or money order made payable to PennDOT for the exact amount you owe along with the application, and any other required documents to:

PennDOT • Bureau of Driver Licensing • Restorations unit, Ignition Interlock Limited License • P.O. Box 68273 • Harrisburg, PA 17106-8273

Note: The Department is required to obtain the Licensee's height and eye color under the provisions of the Pennsylvania Vehicle Code. This information will be used for identification purposes in an attempt to minimize driver license fraud.

PROVISIONS OF SECTIONS OF THE VEHICLE CODE

Section 3709 provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or any other public or private property without the consent of the owner thereof or into or on the waters of this Commonwealth, from a vehicle, any waste paper, sweepings, ashes, household waste, glass, metal, refuse or rubbish or any dangerous or detrimental substance, or permitting any of the preceding without immediately removing such items or causing their removal.

For any violation of Section 3709, I may be subject to a fine of up to \$300 upon conviction, including any violation resulting from the conduct of any other persons present within any vehicle of which I am the driver.