

NON-COMMERCIAL LEARNER'S PERMIT

APPLICATION TO ADD/EXTEND/REPLACE/CHANGE/CORRECT

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

If you have not taken or successfully completed the Road Test within three (3) years of your physical examination date, you MUST start over with another Non-Commercial Learner's Permit Application and retake the Knowledge Test.

	NOTE: COMPLETE ALL INFORMATION AS IT APPEARS ON YOUR CURRENT PENNSYLVANIA NON-COMMERCIAL DRIVER'S LICENSE OR LEARNER'S PERMIT												
Α	DRIVER'S LICENSE NUMBER LAST NAME										JR/E	TC	
ü	 												
	FIRST NAME					MIDDLE NAME							
	FIRST NAME					MIDDLE NAWE							
	DATE OF	DATE OF BIRTH TELEPHONE NUMBER (8:00 A.M4:30 P.M.)							DRESS (if applic	able)			
	Month Day	Nonth Day Year											
	CHECK APPLICABLE BLOCK ON LINE 1 AND LINE 2:												
	1ADD	1. ADD/EXTEND LOST (Replace) STOLEN (Replace) MUTILATED (Replace) NEVER RECEIVED										CEIVED	
ļ	2. CLA	2. CLASS C CLASS B CLASS A (Complete Section D)											
_													
В	CHANGE OR CORRECTION ONLY (Important information on reverse side)												
	ADDRESS CHANGE - A Post Office Box number may be used in addition to the actual residence address, but cannot be used as the only address.												
		See reverse if using an out-of-state address.											
	STREET ADDRI	TREET ADDRESS											
	CITY	TY STATE ZIP CODE											
	CITT									PA			
		If you are a registered voter in PA, would you like us to notify your county voter registration office of this change? YES NO											
	If you are no	If you are not a registered voter, you may contact your county voter registration office.											
- 1	NAME C	NAME CHANGE (Please note all name changes must be done in person with original documents) REASON: MARRIAGE DIVORCE (see several side)											
		(see reverse side)											
	LASINAME	LAST NAME JR., ETC. FIRST NAME MIDDLE NAME											
												l	
	OTHER CHA	OTHER CHANGES											
						•	_						
	EYE COLOR (P	YE COLOR (Please check one): BLUE BROWN GREEN HAZEL PINK BLACK GRAY DICHROMATIC OTHER										ER	
	cc	CORRECTION OF DATE OF BIRTH HEIGHT SOCIAL SECURITY NUMBER											
	MONTH DAY YEAR FEET INCHES												
					•								
_		<u> </u>					_						
C	AUTHORIZ	ATION AND	CERTIFICATION										
	For Ve	torans wishing	to add the Veterans D	esignation to th	eir Driver's Li	lcense (or ID Card: I c	ertify under p	enalty of law th	at I am a qualifled	applicant and	d hereby request it	
		For Veterans wishing to add the Veterans Designation to their Driver's License or ID Card: I certify under penalty of law that I am a qualified applicant and hereby request it be added to my product. I understand that misrepresentation will result in the cancellation of my driver's license.									er state 1 cartify		
	under penalt	I acknowledge that receiving a Pennsylvania Permit, License or ID card will cancel or invalidate any Permit, License or ID card from another state. I certify under penalty of law that all information given on this application is true and correct. I hereby authorize the Social Security Administration to release to the Department of											
	Transportatio	I acknowledge that receiving a Pennsylvania Permit, License of the Card will cancer or invalidate any Fermit, License of the Card will under penalty of law that all information given on this application is true and correct. I hereby authorize the Social Security Administration to release to the Department of Transportation information concerning my Social Security Identification Number for the purpose of Identification. If using a Messenger Service, I hereby authorize the Department to furnish them with my driving record for the purpose of processing this form. I hereby acknowledge this day that I have received notice of the provisions of Section 3709 of the Vehicle											
	Code, (See re	Code, (See reverse for provisions.) I wish to contribute \$3.00 to the Organ Donation Awareness Trust Fund. (see reverse)											
		I wish to contribute \$3.00 to the Veterans' Trust Fund. (see reverse) WARNING: Misstatement of Fact is a misdemeanor of the											
	ร์โด้โ	SIGN third degree punishable by a fine of up to \$2,500 and/or											
	HERE										S. Section 4904(b)).		
	APPLICANT'S SIGNATURE IN INK DATE PAID BY: Debit/Credit Card Check Money Order Payable to PannDOT (PennDOT Driver License Centers do not accept cash. TOTAL \$ For more payment options please visit www.dmw.pa.gov)												
D		NOTARY MUST BE COMPLETED IF PRODUCT NOT RECEIVED E MUST BE COMPLETED IF APPLICANT IS UNDER THE AGE OF 18										THE AGE OF 18	
	OR IF APP	LICANT IS	UNDER THE AGE O)F 18					l hereby	certify that	am		
	If you never	received you	ur Learner's Permit y	ou are entitle	ed to a free p								
	ONLY if this	application	is completed within	ne original d	Parent, Guardian, Person In Loco Parentis, or Spouse								
	issuance and the original was never received due to loss in the mail.							at least 18 years of age, of the applicant named herein,					
	SUBSCRIB	SUBSCRIBED AND SWORN						that the statements made hereon are true and correct to the					
	TO BEFOR	TO BEFORE ME: MO. DAY YEAR						best of my knowledge and that this application is made with					
		TO DESCRIBE THE TOTAL TO							_				
		SIGNATURE OF PERSON ADMINISTERING OATH											
		SIGNATURE OF PERSON ADMINISTERING CATE											
							SÌGN HERE						
	1 1	S E SIGN IN PRESENCE OF NOTARY					(Signature of Parent, Guardian, Person in Loco Parentis or Spouse at least 18 years of age)						
	16 - 1						,,						
		A SIGN IN PRESENCE OF NOTATI											
	L							(Print Name as it Appears in Signature Above)					

The most current version of this form can be found at: www.dmv.pa.gov

OUT-OF-STATE ADDRESS CHANGE. We may not issue driver license products to an out-of-state address, except in the case of an employee of federal or state government, armed forces personnel, or their families, whose workplace is located outside of Pennsylvania. If this exception applies to you, please check the appropriate box and include documentation of 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 the allowable exceptions, attach the documentation of the person employed. Additionally, you must indicate your relationship to that person. 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: US Armed Forces | Federal Government Pennsylvania State Government

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 C.

Spouse

Dependent Child

All applicants must complete Sections A, B (if applicable), and C.

Relationship to person meeting exemption (check one):

- Notarization (Section D) is required IE (1) applying for a never received Learner's Permit or (2) applicant is under the age of 18.
- Section E MUST be completed if applicant is under the age of 18.
- Return your completed and signed application with check or money order made payable to "PennDOT" to: Bureau of Driver Licensing, P.O. Box 68272, Harrisburg, PA 17106-8272.

FEE INFORMATION

NON-COMMERCIAL CLASS A, B, OR C LEARNER'S PERMIT	Fee: \$5.00 for each permit requested. If you checked the never received block and Section D is notarized, a fee is not required.
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 \$3.00 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.
CHANGE/CORRECTION ONLY	NO FEE REQUIRED — The Bureau will issue an update card reflecting the change/correction which must be carried with the Pennsylvania Identification Card. Notarization is not required.

NAME CHANGE - If you desire to use your birth name, you must present 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. TTY callers - please dial 711 to reach us.

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.

CLASS INFORMATION

CLASS C (Minimum Age 16) Required to operate a single non-commercial* vehicle not over 26,001 lbs. gross vehicle weight rating (such as passenger car, station wagon, or small truck) or any such vehicle, except those requiring a motorcycle classification, that does not meet the definition of Class A or Class B. (Class C permit does not include any other class.)

(Minimum Age 18) Required to operate a combination non-commercial* vehicle with a gross vehicle weight rating of 26,001 pounds or CLASS A more, provided the gross vehicle rating of the vehicle being towed is in excess of 10,000 pounds. (Class A permit includes Classes B and C.) (Minimum Age 18) Required to operate a non-commercial* single vehicle of 26,001 pounds or more gross vehicle weight rating or any

CLASS B such vehicle towing a trailer not over 10,000 pounds gross weight. (Class B permit includes Class C.)

The holder of a Class A, B, or C driver's license will also be authorized to drive a moped.

*The term includes an implement of husbandry, certain motorized construction equipment not intended for on-road use, or any motor home or trailer operated solely for personal use.

PROVISIONS OF SECTION 3709 OF THE VEHICLE CODE

Section 3709 provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or upon 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.