



STATE EMPLOYEE IDENTIFICATION CARD APPLICATION

- ◆ SEE INSTRUCTIONS ON BACK OF FORM
- ◆ PLEASE PRINT OR TYPE THE INFORMATION BELOW

Please Note: This form is available on the DMV website at www.dmv.state.vt.us

<b>EMPLOYEE INFORMATION</b>	<b>EMPLOYEE'S FULL NAME</b> (First, Middle Initial, Last)	
	<input type="text"/>	
	<b>EMPLOYEE'S TITLE</b>	<b>EMPLOYEE'S VT LICENSE #</b>
	<input type="text"/>	<input type="text"/>
	<b>EMPLOYEE'S WORK ADDRESS (STREET &amp; CITY)</b>	
	<input type="text"/>	
	<b>EMPLOYEE'S (HOME) MAILING ADDRESS</b>	
	<input type="text"/>	
<b>EMPLOYEE'S ID NUMBER</b>	<b>EMPLOYEE'S DATE OF BIRTH (MM/DD/YYYY)</b>	
<input type="text"/>	<input type="text"/>	
<b>EMPLOYEE'S SIGNATURE</b>		
<input type="text"/>		
I agree to surrender my employee identification card upon termination of my employment. <b>Note:</b> There will be no refunds of fees paid by employees for an ID when the ID is returned.		

<b>VOID DATE</b>	<b>VOID DATE (MM/DD/YYYY)</b>	<b>CHECK-MARK IF 'INDEFINITE'</b>
	<input type="text"/>	<input type="checkbox"/> <b>INDF</b>

<b>EMPLOYER INFORMATION</b>	<b>AGENCY NAME</b>	
	<input type="text"/>	
	<b>DEPARTMENT NAME</b>	
	<input type="text"/>	
	<b>SIGNATURE OF AUTHORIZING AGENT</b>	<b>TITLE OF AUTHORIZING AGENT</b>
<input type="text"/>	<input type="text"/>	

<b>PAYMENT INFORMATION</b>	<b>If paying by check, make payable to the <i>Department of Motor Vehicles</i></b>	
	→ If payment is being made via <b>VISION</b> , provide the following information. <b>Note:</b> A VISION Transfer Transaction screen print <b>must</b> accompany this application.	
	<b>NAME</b>	<b>VENDOR NUMBER</b>
	<input type="text" value="AOT-DMV-001"/>	<input type="text" value="133778"/>
	<b>INVOICE</b> (Enter employee's name)	<b>PAYMENT</b>
<input type="text"/>	<input type="text" value="WIRE"/>	

**FOR DMV USE ONLY**

Department ID: 8100002100	AUDIT LINE
Business Unit: 08100	
Account Code: 516550	
Fund/PGM: 20105/59300	

Complete the application as follows:

▪ **EMPLOYEE INFO:**

1. Employee's Name - Enter the Employee Name, not to exceed 25 characters **including** spaces. *Example: 'John K. Smith'*
2. Employee's Title - Enter the Employee Title, not to exceed 35 characters **including** spaces. *Example: 'Customer Services Representative III'*
3. Employee's VT License # - Enter your Vermont driver license/permit number, not to exceed 8 characters
4. Employee's Work Address - Enter the Street and City address of the employee, not to exceed 36 characters **including** spaces. You do not need to indicate VT or the Zip Code. *Example: '120 State St., Montpelier'*
5. Employee's (home) Mailing Address – Enter the employee's complete home mailing address.
6. Employee's ID Number - Enter the 5 digit employee **ID** number, **not** the employee's position number. If no ID number, enter '00000'. *Example: '12345' or '00000'*
7. Employee's Date of Birth - Enter the employee date of birth in MM-DD-YYYY format. *Example: '01-23-1963'*
8. Employee's Signature - Must be signed by the employee.

▪ **VOID DATE:**

9. Enter the void date of the Identification Card in MM-DD-YYYY format.
10. If 'Indefinite', check mark the 'INDF' box. **NOTE:** The Issue Date of the ID card will be the date the photo is taken.

▪ **AGENCY/DEPT INFO:**

11. Agency Name - Enter the Agency Name. *Example: 'Agency of Transportation'*
12. Department Name - Enter the Department Name. *Example: 'Motor Vehicles'*
13. Signature of Authorizing Agent - Application **must** be signed by an authorized representative of your Agency. **You must have this signature even if you are paying for the ID card yourself.**
14. Title of Authorizing Agent – Enter the Authorizing Agent's title. *Example: 'Chief of Internal Operations'*

▪ **FEE/PAYMENT INFO:**

15. If the ID card will be paid by the employee's Agency/Department, you must enter the appropriate information dependent upon the accounting system used for payment.
  - If payment will be made via **VISION Voucher**, follow the procedure for 'Regular Voucher'. The following information should be used for (submitting payment to) DMV:
    - ⇒ Name: **AOT-DMV-001**
    - ⇒ Vendor (VISION) Number: **133778**
    - ⇒ Invoice: (Enter the name of the person on the application)
    - ⇒ Payment: **Wire**
    - ➔ **You must also submit a VISION voucher screen print with this application.**

B. The ID cards can be obtained at the Department of Motor Vehicles in Montpelier, any of the department's branch offices and at any Mobile Van locations. No appointments are necessary, simply check in when you arrive, and proceed to a counter when called. **NOTE:** You will be subject to the "wait time" at the office you choose to visit.

C. **You will need to provide proof of identification such as a license, birth certificate, prior ID card, etc.**

D. The fee for each identification card is **\$5.00**.

<b>Department of Motor Vehicles Locations</b>		
<b>Bennington</b> 120 Depot Street Monday – Friday, 7:45 a.m. - 4:00 p.m. 1-802-447-2756	<b>Montpelier</b> 120 State Street Monday, Tuesday, Thursday & Friday 7:45 a.m. - 4:30 p.m. <b>Wednesday 7:45 a.m. - 6:00 p.m.</b> 1-802-828-2000	<b>Rutland</b> State Office Complex, 101 State Place Monday, Tuesday, Thursday & Friday 7:45 a.m. - 4:00 p.m. <b>Wednesday 7:45 a.m. - 6:00 p.m.</b> 1-802-786-5815.
<b>Burlington</b> 1193 North Avenue Monday, Tuesday, Thursday & Friday 7:45 a.m. - 4:00 p.m. <b>Wednesday 7:45 a.m. - 6:00 p.m.</b> 1-802-863-7292	<b>Newport</b> 100 Main Street, Suite 130 Monday – Friday, 7:45 a.m. - 4:00 p.m. 1-802-334-3363	<b>Springfield</b> 100 Mineral Street Suite 103 Monday, Tuesday, Thursday & Friday 7:45 a.m. - 4:00 p.m. <b>Wednesday 7:45 a.m. - 6:00 p.m.</b> 1-802-885-5273.

**The Mobile Van travels to Dummerston, Middlebury, St. Albans, St. Johnsbury & White River Jct.**  
 To find out which days the Van will be at these locations call 1-802-828-2000 or check the DMV web site:  
[www.dmv.vermont.gov](http://www.dmv.vermont.gov)