

DEPARTMENT OF MOTOR VEHICLES
 Agency of Transportation

 120 State Street
 Montpelier, Vermont 05603-0001
 802.828.2000
 dmv.vermont.gov

- Duplicate/Corrected CDL (\$10.00) Duplicate/Corrected CDL Learner Permit (\$10.00)
 Duplicate/Corrected Enhanced* CDL (\$35.00) Duplicate/Corrected Enhanced* CDL Learner Permit (\$35.00)

 *If CDL was *Enhanced* complete form TA-VL-11 ENHANCED LICENSE/ID APPLICATION in addition to this form.

↓ Name: Last	First	Middle	
↓ Mailing Address: Street/Road/PO Box	City	State	Zip
↓ Physical Address: Street/Road	City	State	Zip
↓ Date of Birth:	↓ Social Security Number:	↓ Place of Birth: City/State/Country	

The disclosure of your social security or federal identification number is mandatory, is solicited by the authority granted by 42 U.S.C. § 405(c)(2)(C) and/or 666(a)(13) and will be used by the Department of Motor Vehicles in the administration of motor vehicle, tax and child support laws, to identify individuals affected by such laws.

Gender:	<input type="checkbox"/> Male	<input type="checkbox"/> Female	Eye Color:		Height:	Ft.	In.	Weight:	
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⇒ Address Change	<input type="checkbox"/> Check if the address indicated above is a change to: <input type="checkbox"/> Mailing Address <input type="checkbox"/> Physical Address <input type="checkbox"/> Check if the above is a change of residence for voting purposes: <input type="checkbox"/> Yes <input type="checkbox"/> No
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⇒ Name Change:	<input type="checkbox"/> Check if name has changed.	⇒ Indicate former name (Last, First, Middle) below:

My original Commercial Driver's License/Learner's Permit has been:	<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Destroyed <input type="checkbox"/> Needs Correction
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Do you need glasses or corrective lenses for driving?	↓ Are you a U.S. Citizen?	⇒ IF "NO", do you have proof of legal presence for inspection and copying as a part of the application process?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No

Do you meet Federal qualifications for interstate commerce (CFR, PART 391)?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (Governmental/Municipal Employee)
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If you answered "No":	⇒ Explain:	
⇒	Do you meet State of Vermont (Only) Qualifications for Intrastate Commerce?	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby affirm, under penalty of perjury, that the information on this form is true to the best of my knowledge, that I am not delinquent in any obligation to pay child support or that I am in good standing with respect to any obligation to pay child support, and that I am in good standing with respect to any unpaid judgment issued by the judicial bureau or district court for fines and penalties for a violation or criminal offense. If taking the driving test, I certify the vehicle in which I take my driving test is representative of the vehicle class and type that I intend to operate. This declaration made under penalties of 23 VSA § 202 & § 4110 and 32 VSA § 3113.

⇒ Signature of Applicant:	Date:

AUDIT LINE:

FOR DEPARTMENT USE ONLY ~ DO NOT WRITE IN THIS AREA

ID#: _____

Name/DOB Change
 Misc. Change
 POB Sex Eye Ht. Wgt.
 Mailing Address
 Social Security Number
 Add Legal Address
 Change Legal Address
 Restriction Change
 Endorse Change
 QCDL - Required
 NBS/NBE - Required

Rater #: _____

ENDORSEMENTS					
<input type="checkbox"/> A	<input type="checkbox"/> B	<input type="checkbox"/> H	<input type="checkbox"/> M	<input type="checkbox"/> N	<input type="checkbox"/> X
<input type="checkbox"/> P	<input type="checkbox"/> S	<input type="checkbox"/> T	<input type="checkbox"/> V	<input type="checkbox"/> X	
RESTRICTIONS					
<input type="checkbox"/> B - Corrective Lenses			<input type="checkbox"/> C - Mechanical Aid		
<input type="checkbox"/> D - Prosthetic Aid			<input type="checkbox"/> E - Auto. Transmission		
<input type="checkbox"/> K - Intrastate Only			<input type="checkbox"/> J - Other		
<input type="checkbox"/> M - Except Class A Bus			<input type="checkbox"/> L - Vehicle w/o Air Brakes		
<input type="checkbox"/> O - Except Tractor-Trailer			<input type="checkbox"/> N - Except Class A & Bus B		

Issue Date: _____	Class: _____
CDL/CDP	65
Enhanced CDL/CDP	33
Endorsement Exam	67
Total	

INSTRUCTIONS

1. This application must be completed in full and signed, in ink, by the applicant.
2. An enhanced CDL requires completion of separate form; TA-VL-11 ENHANCED LICENSE/ID APPLICATION.

(WRITTEN) EXAMINATION TIMES & PLACES ARE SUBJECT TO CHANGE

BENNINGTON:	BURLINGTON:	NEWPORT:
120 Depot Street 802-447-2756 Monday - Friday: 7:45 a.m. - 4:00 p.m.	1193 North Avenue 802-863-7292 Monday - Friday: <u>Except Wednesday:</u> 7:45 a.m. - 4:00 p.m. 7:45 a.m. - 6:00 p.m.	100 Main Street, Suite #130 802-334-3363 Monday - Friday: 7:45 a.m. - 4:00 p.m.
RUTLAND:	MONTPELIER:	SPRINGFIELD:
101 State Place 802-786-5815 Monday - Friday: <u>Except Wednesday:</u> 7:45 a.m. - 4:00 p.m. 7:45 a.m. - 6:00 p.m.	120 State Street 802-828-2085 Monday - Friday: <u>Except Wednesday:</u> 7:45 a.m. - 4:30 p.m. 7:45 a.m. - 6:00 p.m.	100 Mineral Street, Suite #103 802-885-5273 Monday - Friday: <u>Except Wednesday:</u> 7:45 a.m. - 4:00 p.m. 7:45 a.m. - 6:00 p.m.
MOBILE VAN:	Stops in Dummerston (Brattleboro), Hartford (White River Jct.), Middlebury, St. Albans and St. Johnsbury. Please call 802-828-2000 for further information about the Mobile Van's schedule or visit us at: dmv.vermont.gov	

3. If the address given differs from our records, the application will be notification of address change for all your records.
4. Make checks and money orders payable to the Vermont Department of Motor Vehicles in U. S. funds. Overpayment of \$1.00 or less will not be refunded unless specifically requested in writing.
5. **REQUIRED IDENTIFICATION DOCUMENTATION** - Each applicant for a duplicate CDL Learner's Permit, Operator's License or Non-Driver ID is required to show documentary proof of identity and date and place of birth. Proof of identity shall be one primary document and one secondary document from the following list. A primary document must contain the full name and date of birth and must be verifiable, i.e., we must be able to contact the issuing agency to determine the authenticity of the document.

PRIMARY DOCUMENTS:

Photo driver license (cannot be expired more than one year), State/province/territory issued photo ID card (not expired more than one year), Certified microfilm/copy of driver license or ID card (cannot be expired more than one year), Certificate of Birth (U.S. or Canadian issued which must be an original or certified copy, have a raised seal and be issued by the Bureau of Vital Statistics or State Board of Health. Hospital issued birth certificates and baptismal certificates are NOT acceptable.)

USCIS (U.S. Citizenship & Immigration Services) DOCUMENTS, AS FOLLOWS:

Certificate of Naturalization (N-550, N-570, or N-578), Certificate of Citizenship (N-560, N-561, or N-645), Northern Marina Card (I-551), American Indian Card (I-551), U.S. Citizen Identification Card (I-179 or I-197), Resident Alien Card (I-151, I-551, AR-3A, or AR-103), Temporary Resident Identification Card (K-688), Non-resident Alien Canadian Border Crossing Card (I-185 or I-586), Record of Arrival and Departure (in a valid Foreign Passport, I-94 or I-94W visa waiver program), Record of Arrival and Departure w/attached photo stamped 'Temporary Proof of Lawful Permanent Resident' (I-94 processed for I-551 stamp in a valid Foreign Passport), Permanent Resident Re-entry Permit (I-327), Refugee Travel Document (I-571), Record of Arrival and Departure in a Certificate of Identity (I-94), Record of Arrival and Departure Stamped 'Refugee', 'Parole', 'Parolee' or 'Asylee' (I-94, Employment Authorization Document (card) 'EAD' Ins. form I-766, Canadian Immigration Record and Visa or Record of Landing (IMM 1000), Court order (must contain full name, date of birth and court seal. Examples include adoption document, name change document, gender document, etc.), Military ID, Valid passport (U. S. or Canadian - if foreign, appropriate INS document also is required), State issued photo learner permit (Out-of-state issued permit is NOT acceptable, cannot be expired more than one year. A learner permit without a photo is NOT acceptable UNLESS accompanied by a primary document), Canadian Department of Indian Affairs issued ID card (Tribal issued card and U.S. issued Department of Indian Affairs card are NOT acceptable).

SECONDARY DOCUMENTS:

All Primary Documents, Bureau of Indian Affairs Card/Indian Treaty Card (Tribal ID card is NOT acceptable), Driver license/ID card, expired more than one year, Court order that does not contain the applicant's date of birth, Employer ID card, Foreign birth certificate (must be translated by approved translator), Health insurance card, i.e., Blue Cross/Blue Shield, Kaiser, HMO, IRS/State tax forms W-2 NOT acceptable, Marriage certificate/license, Civil Union certificate/license, Medical records from doctor/hospital, Military dependent ID, Military discharge/separation papers, Parent/guardian affidavit (Parent/guardian must appear in person and prove his/her identity and submit a certified/notarized affidavit regarding the child's identity - applies only to minors), Gun Permit, Pilot's license, School record/transcript (must be certified), Social security card (Metal card is NOT acceptable), Social insurance card (for Canadian residents only), Student ID Card (must contain photo), Vehicle title (vehicle registration NOT acceptable), Welfare card, Prison release document.

Additional documentation may be required at the Department's discretion if documentation submitted is questionable or if there is reason to believe the person is not who s/he claims to be.

The name, date of birth and place of birth shown on this application must match the information shown on the proof of identity documents submitted with the application. Applicants must bring original documents with them to a DMV Customer Service Counter. Copies of documents submitted will be retained by this Department.