

License Class	Transaction Type
<input type="checkbox"/> CLASS B - Single vehicles with GVWR of 26,001 pounds or more, providing any towed vehicle has GVWR of 10,000 pounds or less. <input type="checkbox"/> CLASS C - Single vehicles with GVWR of 26,000 pounds or less. These vehicles may tow a vehicle with GVWR of 10,000 pounds or less.	<input type="checkbox"/> Original Application <input type="checkbox"/> Subsequent Application (12 months) <input type="checkbox"/> Renewal



Name: Last	First	Middle

If applicable, list all former names exactly as they appeared on your previous licenses

Mailing Address (Address Where You Get Your Mail): <i>If PO or Private Box, also fill in "Physical Address" below.</i>	City:	State:	Zip:
Physical Address (Address Where You Live) <i>NO PO or Private Box. Physical Address Will Be Printed On Your License.</i>	City:	State:	Zip:


Vermont License or Permit #	Date of Birth (mm/dd/yyyy):	Place of Birth (City, State & Country):		
Social Security Number:	Gender:	Eye Color:	Height:	Weight:

Phone Number:	Email address:

 I wish to be registered as an organ & tissue donor <input type="checkbox"/> YES <input type="checkbox"/> NO	Veterans; DMV " Vermont Certificate of Veteran Status " (DMV Form VG-168)" must also be included (unless previously submitted).
 I am a veteran of the US Military & I want "VETERAN" printed on my License. <input type="checkbox"/> YES <input type="checkbox"/> NO	

1. Do you need glasses or contact lenses when driving?	<input type="checkbox"/> YES <input type="checkbox"/> NO
2. Do you have a history of a physical or mental condition including diabetes, epilepsy, seizures or blackouts (other than properly corrected eyesight) that could affect your ability to safely operate a motor vehicle? If 'Yes' indicate condition(s)/medication(s):	<input type="checkbox"/> YES <input type="checkbox"/> NO
3. If your License contains a <i>motorcycle</i> endorsement, do you wish to keep it? (\$3 additional per year)	<input type="checkbox"/> YES <input type="checkbox"/> NO
4. Do you meet State of Vermont (only) qualifications for intrastate commerce? VT Physical Examination Certificate required (form VN-168a)	<input type="checkbox"/> YES <input type="checkbox"/> NO
5. Do you meet Federal qualifications for interstate commerce (CFR, part 391)? DOT/ICC medical card required (Government employees are exempt)	<input type="checkbox"/> YES <input type="checkbox"/> NO
6. Is your license suspended, revoked or cancelled in this or any other State or jurisdiction? If yes, give details:	<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. This declaration made under penalties of 23 VSA § 202 & § 4110. I certify I understand this license is valid only for the season indicated and use of the license for any other purpose will be grounds for revocation.	Signature of Applicant X	Date Signed _____
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<input type="checkbox"/> Name CHG (231) <input type="checkbox"/> DOB CHG (231) <input type="checkbox"/> MISC CHG (231) POB SEX EYE HT WGT <input type="checkbox"/> Mail Address (232) <input type="checkbox"/> SSN Change (232) <input type="checkbox"/> Physical Address (233) ADD CHG	<input type="checkbox"/> 225 <input type="checkbox"/> 227 <input type="checkbox"/> 234 <input type="checkbox"/> NNL Photo <input type="checkbox"/> PDPS <input type="checkbox"/> Real ID Compliant Voter Registration <input type="checkbox"/> Yes <input type="checkbox"/> No	PID: Issue Date: Expire Date: Rater #:	Class 1 Expires: Full Lic Years Remaining: ____		CDL (59) <hr/> Less Credit () <hr/> Sub-Total <hr/> M End (71) <hr/> Total
Endorsements:	Restrictions: W				

Instructions

*In order to qualify for a FRSI restricted license you must meet 49 CFR Part 383 and obtain a letter, on letterhead, from your employer verifying your employment (must include beginning and ending dates of employment). Farm Related Services Industries Licenses will only be issued for Class B or Class C with **NO** CDL endorsements.*

- Sign your name in ink. All other information should be printed in ink or typed.
- If any of the questions are unanswered, the application will be returned to you.
- An applicant must be at least 18 years of age to drive a commercial motor vehicle in Vermont or 21 years of age to drive a commercial motor vehicle interstate (between Vermont and another state).
- The Department of Motor Vehicles must be notified in writing, within 30 days, of any change to your mailing address or legal residence.
- If you change your name, you must apply in person for a photo license.
- Make all checks and money orders payable to the Vermont Department of Motor Vehicles. All fees must be paid in U.S. dollars.
- Any applicant who receives a FRSI restricted license must re-apply with the above qualifications at the beginning of every season.
- FRSI restricted license holders will be given a restriction card with the valid season months indicated.

Note: This receipt gives no right to operate a motor vehicle, except as a temporary learner's permit when accompanied by a motor vehicle examiner.