

APPLICATION FOR INTERNATIONAL DRIVING PERMIT
or
INTER-AMERICAN DRIVING PERMIT

FEE FOR EACH PERMIT \$10.00

Issuance of Permit is restricted to persons EIGHTEEN YEARS or over who hold a valid U.S.A. or Territorial License.
PERMIT VALID FOR ONE YEAR. Not renewable.

CHECK DESIRED PERMIT

- ☐ International Driving Permit (Fee \$10.00 and 2 Passport Type Photos signed on back)
- ☐ Inter-American Driving Permit *** (see reverse side) (Fee \$10.00 and 2 Passport Type Photos signed on back)

MANDATORY REQUIREMENTS

- (1) Attach 2 recent signed Passport Type Photos (2" x 2")
- (2) Enclose permit fee of \$10.00 (NO CASH)
- (3) If mailing application, a photocopy of U.S. Driver's License must accompany completed application.

NOTE: IT IS IMPORTANT THAT YOUR U.S.A. OR TERRITORIAL LICENSE BE CARRIED WITH THE PERMIT

-----**AT ALL TIMES.** The International or Inter-American Permit is not valid for driving in the United States.

PRINT NAME IN FULL. No Initials

Mr. Mrs. Ms. (Circle One)

FIRST _____ MIDDLE _____ LAST _____

PHONE _____ HOME STREET
ADDRESS _____

CITY _____ STATE _____ ZIP CODE _____

U.S. DRIVER'S LICENSE NO. _____ STATE OF ISSUE _____ EXPIRATION
DATE _____

BIRTHPLACE:
CITY _____ STATE OR COUNTRY _____ BIRTH DATE (MO . DAY YEAR)

DATE PERMIT TO BE EFFECTIVE _____ DEPARTURE DATE FROM
U.S. _____

FOREIGN ADDRESS (If known)

PLEASE CHECK THE APPROPRIATE BOX BELOW TO INDICATE THE TYPE OF VEHICLE FOR WHICH YOU NOW HOLD A VALID U.S.A. OR TERRITORIAL DRIVER'S LICENSE, AND FOR WHICH YOU DESIRE THIS PERMIT:

☐ MOTORCYCLE	☐ PASSENGER CAR	☐ VEHICLE OVER 7,700lbs	☐ VEHICLE OVER 8 SEATS	☐ VEHICLE WITH HEAVY TI
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I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT, AND THAT THE LICENSE INDICATED HAS NOT BEEN SUSPENDED NOR REVOKED.

I FURTHER CERTIFY THAT I UNDERSTAND THAT A VALID STATE DRIVER'S LICENSE MUST ACCOMPANY THIS PERMIT, AND THAT THIS PERMIT IS VALID ONLY AS LONG AS THE STATE LICENSE IS VALID, BUT NOT TO EXCEED ONE YEAR FROM THE DATE THE PERMIT IS ISSUED.

SIGNATURE_____DATE_____
(signature mandatory for issuance of Permit)

THIS IS YOUR MAILING LABEL. Please print to ensure prompt delivery

NAME_____

STREET_____

CITY_____STATE_____ZIP CODE_____

COUNTRY_____

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