



Voluntary Surrender of Driver License and Driving Privilege

P.O. Box 201430 Helena, MT 59620-1430 • Phone (406) 444-4590 • Fax (406) 444-7623 • dojmt.gov/driving/

This form is for license holders to voluntarily surrender their driver license or motorcycle endorsement.

PRINT IN BLUE OR BLACK INK ONLY.

A Applicant Section	Applicant's Legal Name (First): _____ (Middle): _____ (Last): _____	
	Mailing Address: _____	City: _____ State: _____ Zip Code: _____
Driver License Number: _____	Driver License Expiration Year: _____	Date of Birth: _____

B Statement of understanding	<ul style="list-style-type: none"> I am voluntarily choosing to surrender my: <ul style="list-style-type: none"> <input type="checkbox"/> Class D driver license <input type="checkbox"/> Commercial driver license <input type="checkbox"/> Hazmat Endorsement <input type="checkbox"/> Motorcycle endorsement or motorcycle only license <input type="checkbox"/> REAL ID <input type="checkbox"/> Identification Card I understand: <ul style="list-style-type: none"> <input type="radio"/> MVD will immediately cancel the selected license, endorsement, or identification card. <input type="radio"/> I may apply for a driver license or endorsement in the future. I will be required to pay the fees and successfully complete the vision, knowledge, and skills tests. <input type="radio"/> I may apply for an identification card in the future. I will be required to pay the fees. <input type="radio"/> I may need to provide additional information before I can test. For example, a favorable medical evaluation report.
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C Applicant's Acknowledgement	Under penalty of law (MCA 45-7-203), I certify that:
	<p>I am the person named on this form. The statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief.</p> <p>Legal Signature _____ Date _____</p> <p>Printed Name _____</p> <p>LEGAL GUARDIAN CONSENT: I certify that as a parent or legal guardian of the above-named individual, I consent to the surrender of Montana driver license or endorsement.</p> <p>Representative Legal Signature _____ Date _____</p> <p>Printed Name of Representative _____</p>

FOR OFFICIAL USE ONLY:	Date: _____	Primary ID Document: _____
Action taken: _____		Examiner: _____