



# COMMERCIAL DRIVER'S LICENSE

## APPLICATION FOR RENEWAL

<b>A</b> DRIVER'S LICENSE NUMBER										LAST NAME										JR/ETC				
FIRST NAME															MIDDLE NAME									
DATE OF BIRTH (must be listed)			AGE		HEIGHT		SOCIAL SECURITY NUMBER										SEX		TELEPHONE NUMBER					
MONTH	DAY	YEAR	FEET	INCHES													( )							
EYE COLOR (Please check one):															<input type="checkbox"/> BLUE <input type="checkbox"/> BROWN <input type="checkbox"/> GREEN <input type="checkbox"/> HAZEL <input type="checkbox"/> PINK <input type="checkbox"/> BLACK <input type="checkbox"/> GRAY <input type="checkbox"/> DICHROMATIC <input type="checkbox"/> OTHER _____									

<b>B</b> This Area For CHANGE or CORRECTION ONLY <i>(Important information on reverse side)</i>	ADDRESS CHANGE - (P.O. Box Number may be used in addition to the actual address, but cannot be used as the only address)																	
	NEW STREET ADDRESS										CITY			STATE		ZIP CODE		
	By law, if you are registered to vote, this application will also change your voter registration address unless you check here. <input type="checkbox"/>																	
	NAME CHANGE REASON: <input type="checkbox"/> MARRIAGE <input type="checkbox"/> DIVORCE <input type="checkbox"/> OTHER (see reverse side) <b>DROP CLASS M:</b> <input type="checkbox"/>																	
	LAST					JR., ETC.		FIRST NAME					MIDDLE NAME					
CORRECTION OF DATE OF BIRTH			HEIGHT		SOCIAL SECURITY NUMBER										EYE COLOR		SEX	
MONTH	DAY	YEAR	FEET	INCHES													<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	

**C** PLEASE COMPLETE EACH NUMBERED STATEMENT. If you have a hazardous material endorsement, to keep that qualification you must successfully complete the hazardous material knowledge test prior to renewing your license.

**D** FOR ARMED FORCES MEMBERS AND DEPENDENTS WHOSE LAST PA DRIVER'S LICENSE EXPIRED MORE THAN 5 YEARS AGO.

**ALL MUST BE ANSWERED**

- I certify that I drive a Commercial Vehicle and meet all the requirements contained in Federal Regulation 49 CFR Part 391 in:
  - Intrastate Operation Only    Interstate Operation
- I certify that I am not subject to any disqualification, suspension, revocation, or cancellation of my driving privilege.
- I certify that:
  - I do not have a driver's license from any other state or licensing jurisdiction.
  - I do hold a valid driver's license issued by another state.  
 State: \_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 Driver's License No.: \_\_\_\_\_  
 Driver's License has been surrendered to the Driver License Exam Center at: \_\_\_\_\_ on \_\_\_\_\_

(DLE SIGNATURE) \_\_\_\_\_ (DLE NUMBER) \_\_\_\_\_

**NOTE: License MUST be attached.**

- Are you an Armed Forces Member?    YES    NO
- Were you an Armed Forces Member within the last 45 days?    YES    NO
- Were you discharged or transferred to the Commonwealth within the last 45 days?    YES    NO
- If an Armed Forces dependent, state relationship \_\_\_\_\_ (SPOUSE, DEPENDENT CHILD)  
who resides with \_\_\_\_\_ (NAME OF ARMED FORCES MEMBER)
- Date of entry into the Armed Forces \_\_\_\_\_
- Date of Discharge \_\_\_\_\_

**E AUTHORIZATION AND CERTIFICATION (Sign and Enter Fee)**

I certify under penalty of law that all information given on this application is true and correct. I hereby authorize the Social Security Administration to release to the Department of Transportation information concerning my Social Security Identification Number for the purpose of identification. If using a Messenger Service, I hereby authorize the Department to furnish them with my driving record for the purpose of processing this form. I hereby acknowledge this day that I have received notice of the provisions of Section 3709 of the Vehicle Code. (See reverse for provisions.)

I wish to contribute \$1.00 to the Organ Donation Awareness Trust Fund (see reverse).  
If checked here, include the additional \$1.00 in the amount entered in the Fee Paid block.

\_\_\_\_\_  
APPLICANT'S SIGNATURE IN INK

**FEE PAID**  
Send Check In  
This Amount

WARNING: Misstatement of Fact is a misdemeanor of the third degree punishable by a fine of up to \$2,500 and/or imprisonment up to 1 year (18 Pa. C.S. Section 4904(b)).

**F REQUEST FOR EXEMPTION FROM PHOTO DUE TO RELIGIOUS REASONS -(SEE REVERSE FOR ADDITIONAL REQUIREMENTS)**

I \_\_\_\_\_ (APPLICANT'S NAME) am requesting a photo exemption for religious reasons because I accept the \_\_\_\_\_ (NAME OF RELIGIOUS GROUP) which forbids the taking of photographs.

X \_\_\_\_\_  
SIGNATURE HERE (Also sign in Section E)

## INSTRUCTIONS

**PLEASE TYPE OR PRINT ALL INFORMATION IN BLUE OR BLACK INK.**

**COMPLETE sections A, B (if applicable), C, D (for armed force members or dependents), E and F (if you are asking for exemption from photo license due to religious reasons ONLY).**

**Religious Exemptions:** If requesting religious exemption, a letter must accompany this application that includes:

- A. The request for the exemption;
- B. The name of the religious group to which the applicant is affiliated;
- C. A statement that the religion's belief forbids the taking of photographs; and
- D. The applicant's signature.

### **CHANGE OR CORRECTION**

1. IF NAME IS CHANGED by permission of court, attach a Certified Copy of the Court Order. If you desire to use a name other than your (1) birth name, (2) spouse's surname, or (3) a name given through a Court Order, you must provide a copy of a Social Security Card (or records), together with copies of documents from two other sources issued in the desired name such as: Tax Records, Selective Service Card, Voter Registration Card, Passport, any form of Photo I.D. issued by a governmental agency, or state issued Birth Certificate.
2. IF THE YEAR OF BIRTH on driver's license is incorrect, attach official birth certificate.
3. IF SOCIAL SECURITY NUMBER is incorrect, attach a copy of your Social Security card.

### FEE INFORMATION

#### ORGAN DONATION AWARENESS TRUST FUND (ODTF):

**You have the opportunity to contribute \$1.00 to the Fund. The additional \$1.00 must be added to the fees below and included in your payment by check/money order. You must also check the block provided in Section E to ensure proper handling of your contribution. The ODTF provides for the development and implementation of donor awareness programs and funds shall be appropriated subject to the approval of the Governor.**

**Fee: \$64.00** — You have been designated by the Bureau to receive a four year photo license.

**Fee: \$72.00** — If applying for renewal of a commercial driver's license endorsed with a Class M.

**NOTE:** Drivers age 65 and over have the option of requesting a two (2) year driver's license.

**Fee: \$34.00** — Two (2) year renewal of commercial driver's license.

**Fee: \$38.00** — Two (2) year renewal of commercial driver's license endorsed with a Class M.

- ✦ **Return your completed and signed application, along with your check or money order payable to "PennDOT", to the: Bureau of Driver Licensing, P.O. Box 68272, Harrisburg, PA 17106-8272.**

### INFORMATION FOR USERS OF THIS FORM

- The Department is required to obtain the Licensee's Social Security Number, height and eye color under the provisions of Sections 1510(a) and/or 1609(a)(4) of the Pennsylvania Vehicle Code. This information will be used as identifying information in an attempt to minimize driver license fraud. The Social Security Number is not part of your public driver's record. Federal law permits the use of the Social Security Number by state licensing officials for purposes of identification.

**FRAUDULENTLY ALTERING, EXHIBITING OR LOANING YOUR LICENSE IS A SERIOUS CRIME. VIOLATORS ARE SUBJECT TO PROSECUTION AND CANCELLATION OF THEIR DRIVER'S LICENSE.**

### PROVISIONS OF SECTION 3709 OF THE VEHICLE CODE

Section 3709 provides for a fine of up to \$300 for dropping, throwing or depositing, upon any highway, or upon any other public or private property without the consent of the owner thereof or into or on the waters of this Commonwealth, from a vehicle, any waste paper, sweepings, ashes, household waste, glass, metal, refuse or rubbish or any dangerous or detrimental substance, or permitting any of the preceding without immediately removing such items or causing their removal.

For any violation of Section 3709, I may be subject to a fine of up to \$300 upon conviction, including any violation resulting from the conduct of any other persons present within any vehicle of which I am the driver.