



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

VALID WITH PREVIOUS PHOTO LICENSE / PERMIT / ID CARD APPLICATION

Reason you are applying: ☐ Replacement
☐ Renewal

Review the information on Page 2 of this application. All requirements must be met to be eligible to renew or replace your license.

APPLICANT INFORMATION:

NOTE: YOUR ADDRESS BELOW MUST BE CURRENT. THE U.S. POSTAL SERVICE WILL NOT FORWARD YOUR LICENSE OR ID CARD.

LAST NAME (PLEASE PRINT)		FIRST NAME		MIDDLE NAME		SOCIAL SECURITY NUMBER				
OREGON LICENSE / ID NUMBER		DATE OF BIRTH (MM-DD-YYYY)		MOTHER'S MAIDEN NAME		PLACE OF BIRTH (CITY AND STATE OR COUNTRY)				
Do you want your license/ID to show that you are an anatomical donor? <input type="checkbox"/> YES <input type="checkbox"/> NO		Do you want your license/ID to show that you are deaf/hard of hearing? <input type="checkbox"/> YES <input type="checkbox"/> NO		Do you currently hold hazmat endorsement? <input type="checkbox"/> YES <input type="checkbox"/> NO		HEIGHT FT. IN.	WEIGHT LBS.	SEX (CIRCLE) M F X	HAIR COLOR	EYE COLOR

To be eligible to renew a CDL with a hazmat endorsement you must have a valid TSA background check and have current hazmat knowledge test scores on your Oregon DMV record. See Page 2 of this form for additional information and requirements.

The mailing address listed on this application will be the mailing address on record with DMV. All DMV notices and other business transactions will be mailed to the address listed. For more information about DMV address requirements, go to: www.oregondmv.com

RESIDENCE ADDRESS		TEMPORARY / MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE ADDRESS)	
CITY, STATE, ZIP CODE		CITY, STATE, ZIP CODE	
E-MAIL ADDRESS		TELEPHONE NUMBER (WE ARE UNABLE TO CALL OUT OF COUNTRY AREA CODES) ()	

CURRENT OR PREVIOUS MILITARY SERVICE: By checking this box, I authorize DMV to send my name and address to the Oregon Department of Veterans' Affairs (ODVA) for the purpose of receiving benefit information. ☐

DRIVING HISTORY:

- Have you ever had a driver license from another state, U.S. territory, or country? ☐ YES ☐ NO If yes, what state or country: _____ Number (if known): _____
- Is your driver license currently suspended, cancelled or revoked? ☐ YES ☐ NO
- List other names you have used on a driver license or ID card. 1. _____ 2. _____

MEDICAL FITNESS CERTIFICATION: (Skip this section if applying for an Identification Card.)

By signing this application, I certify that I do not have a vision condition or impairment that impacts my ability to drive safely which has not been corrected by the use of glasses or contact lenses; I do not have a mental or physical condition or impairment that affects my ability to drive safely; and I do not have a problem condition with alcohol, cannabis, psilocybin, controlled substances or inhalants that affects my ability to drive safely.

APPLICANT CERTIFICATION:

By signing this application, I certify that I am a resident of or domiciled in Oregon as described in ORS 807.062 and that all documentation and information I provided to DMV is true and correct. I understand it is a crime to knowingly make a false application for driving privileges or an ID Card. The offense is a class A misdemeanor and is punishable by jail time, a fine or both. DMV will cancel and/or suspend my driver license, permit or ID if I make a false statement or present false documentation.

**UNDER
18 years
of age:**

Applicant: If applying for a Class C license: I certify that I meet the requirements under ORS 807.065(1)(2): I have completed Driver Education and 50 hours of driving experience; or I completed 100 hours of driving experience; or I have a valid driver license issued by another state.

Parent/Legal Guardian: ORS 807.060(2) requires the signature of applicant's mother or father whose parental rights have not been terminated, or a legal guardian, unless the applicant is an emancipated minor. By signing this application, parent or legal guardian certifies that applicant meets school enrollment requirements under ORS 807.066, unless applicant has a diploma or GED (proof of diploma or GED required).

SIGNATURE OF APPLICANT

X

SIGNATURE OF MOTHER, FATHER, OR LEGAL GUARDIAN

X

SSN: Disclosure of your Social Security number (SSN) is mandatory for issuance, renewal or replacement of your driver license or identification card under ORS 807.021(1).

735-171B (1-25)

SIGNATURE HERE

INSTRUCTIONS

Please sign your signature **within** the box using only black or dark blue ink.



John Q Public

Make sure your signature stays within the boxed area like the sample above. This signature will be electronically transferred to the back of your new driver license.

READ THESE INSTRUCTIONS CAREFULLY

To be eligible for a Valid with Previous Photograph license, permit, or ID card you must:

- ☐ Have a photo on file with DMV that is less than nine years old.
- ☐ Provide a completed and signed [Certification of Oregon Residency Or Domicile, Form 735-7182](#). (Renewal only)
- ☐ Provide proof that you are a resident of or domiciled in Oregon. Acceptable proof is noted on back of the Certification of Oregon Residency Or Domicile Form. (Renewal only)
- ☐ Provide proof of being a U.S. citizen or lawful permanent resident of the United States.
- ☐ Provide your Social Security number (SSN) on the front of this application for verification with the Social Security Administration (SSA). (DMV will not be able to renew or replace your license, permit or ID card if the SSN provided does not verify with the SSA.)
- ☐ Provide proof of your current full legal name, if applicable. Proof of your current full legal name is required if your current full legal name is different then the name printed on your proof of legal presence.
- ☐ Provide photo identification.
- ☐ Provide a completed [VWPP/VWOP Good Cause/Waiver Certification, Form 735-7359](#).
- ☐ Provide a [Certificate of Vision, Form 735-24](#), completed by a licensed vision specialist, if you are renewing your driver license or driver permit and you will be 65 years of age or older at the time your current license or permit expires.
- ☐ Complete and sign this application. You **must** sign this application in the signature box as well as the "electronic signature" box. DMV **cannot** process your application unless you sign the application as required.
- ☐ Meet all other qualifications for the license or ID card.
- ☐ Submit a U.S. negotiable check or money order in the exact amount of the renewal or replacement fee.

Mail your application and supporting documentation **AS ONE PACKET**. Failing to submit a complete packet will result in DMV returning your application. Mail your application to:

Oregon DMV
Driver Transactions Unit, VWPP
1905 Lana Ave. NE
Salem, OR 97314

DMV will mail your VWPP license or ID card to the address on your DMV record. If you require Special Handling, you can provide a prepaid self-addressed envelope or **YOU** have the option to purchase a prepaid mailing envelope from a mailing service provider which will allow you to track your license or ID card. DMV is unable to provide this service for you. You must contact a provider and make arrangements. If you choose to do this Special Handling option, **YOU** must send the prepaid envelope along with your VWPP application.

For assistance determining your eligibility, contact the DMV Driver Transactions Unit at 503-945-5033.

Other important information:

Active duty military persons, their spouses, their partners in a domestic relationship, and their dependents are the only applicants that may add a motorcycle endorsement using the VWPP process. To qualify, you must meet all eligibility requirements for renewal or replacement using the VWPP process. In addition, you must also submit a Motorcycle Safety Foundation Basic Rider Course completion card dated within 2 years of the submission of this application and a [Certificate of Vision, Form 735-24](#).

If you hold a CDL and are renewing, replacing or downgrading your driver license: You must complete and submit the [CDL Addendum to VWPP/VWOP Driver License Application, Form 735-7361](#), in addition to all other required documents.

If you are adding or renewing a farm endorsement, you must complete and submit the [Farm Endorsement Application, Form 735-6776](#), in addition to all other required documents.

If you hold a non-commercial license and are adding or renewing a farm endorsement, you must be eligible for the farm endorsement without testing. See [Farm Endorsement Application, Form 735-6776](#).