

# APPLICATION FOR ALASKA DRIVER LICENSE, PERMIT OR IDENTIFICATION CARD

**INSTRUCTIONS: (Application must be completed in black or blue INK. Please print.)**

- If you are applying for an original Alaska permit, license or state identification card, you must present proof of the following:  
Legal name, date of birth, principal residence address, and social security number (card or letter from Social Security Administration).
- A CDL Application (Form 415) is required in addition to this form to obtain an original or renewal of a **CDL or CDL permit**.

<b>FULL LEGAL NAME:</b>	First	Middle	Last	Suffix			
ALASKA license, permit or ID number, if applicable.		Date of Birth (If under 18, see reverse.)	Sex	Height	Weight	Hair Color	Eye Color
<b>PLACE OF BIRTH:</b>	City		State	Country (If other than USA)		Social Security No. (AS 28.15.061)	
Mailing Address (This address will appear on the license, permit or ID unless you notify us otherwise.)				City	State	Zip Code	
Residence Address (Physical location – no PO Box or Mail Cache addresses.)				City	State	Zip Code	
Would you like to register to vote in Alaska or update (name, address, party) your current Alaska voter registration? <b>YES NO</b>							
Are you a United States Citizen? <b>YES NO</b>							
Do you want to sign up or continue to be an organ and tissue donor? <b>YES NO</b>							
Would you like to donate \$1.00 or more to the organ donor program? <b>YES NO Please enter the donation amount, if applicable. \$</b>							

To obtain a **state identification card**, answer question 1. To obtain **any type of permit or license**, answer questions 1 – 6.

- Have you ever been known by another name? (Marriage, court, or alias) If YES, please list all previous name(s): \_\_\_\_\_ **YES NO**
- Have you ever been licensed as a driver in another state? If YES, list the name of **ALL** the states where you have been licensed. **YES NO**  
 Previous State(s): \_\_\_\_\_  
*Previously issued license/permit must be surrendered before issuance in Alaska. If you have lost your license/permit, you may be required to obtain a driving record from the previous state before an Alaska license/permit can be issued. 2 AAC 90.420 (h)*
- Has your license or driving privilege ever been suspended, revoked, denied, disqualified, or cancelled, or is there a pending action? **YES NO**  
 If YES, is the suspension, revocation, denial, disqualification, or cancellation still in effect? \_\_\_\_\_ Yes No  
 NOTE: *You must meet all reinstatement requirements before a license/permit can be issued to you. AS 28.15.211*
- Do you have any physical impairments **other than** corrective lenses? If YES, describe: \_\_\_\_\_ **YES NO**
- Within the past five years have you suffered from a seizure disorder, heart trouble, paralysis, fainting, loss of consciousness, dizzy spell(s), mental disorder, or other health problems that might impair your driving? If YES, list the type of disorder(s) and date(s). **YES NO**  
 Disorder(s) / date(s): \_\_\_\_\_  
 \_\_\_\_\_ Are all condition(s) under control? Yes No  
*If you have had a seizure or episode of loss of conscious control within the past six months, a license/permit cannot be issued to you. If you have suffered from any of the health problems listed above, a doctor's statement may be required indicating that the condition is under control and that you can safely operate a motor vehicle. In addition, the statement must indicate that you have not had a seizure or loss of consciousness within the past six months. 2 AAC 90.440*  
 Doctor's letter provided? Yes No
- Within the past 5 years have you been committed to or admitted to a hospital or institution for alcoholism or drug addiction? \_\_\_\_\_ **YES NO**  
 If YES, were you:     self-committed or  court ordered  
 If court ordered, do you have a letter from the treatment facility? Yes No

**I certify under penalty of law that all statements above are true and correct.**

X \_\_\_\_\_  
 Signature of Applicant (Sign in front of a DMV Representative) Date AMVC ID / Office Number

