

DRIVER LICENSE OR VEHICLE/VESSEL REGISTRATION INFORMATION REQUEST



Notice to Requester: As a condition to disclosure of information from records which it maintains, the Department of Motor Vehicles will provide the subject of the request with the name, address and telephone number of the requester.

FOR DMV USE		
OWNER'S NAME _____		
ADDRESS _____		
CITY _____	STATE _____	ZIP _____
D.M.V. OFFICE NUMBER ▶		

PLEASE SUBMIT AN INDIVIDUAL FORM PER REQUEST

REQUESTER: (Print carefully.)

YOUR NAME _____		DATE OF REQUEST _____
YOUR ADDRESS _____		TELEPHONE (If none, show "None") _____
CITY _____	STATE _____	ZIP _____

<input type="checkbox"/> REQUEST FOR DRIVER LICENSE RECORD INFORMATION Your request for Driver License Information must contain either the driver license number and name OR full name and birthdate.	INFORMATION REQUESTED <input type="checkbox"/> Driver License Number <input type="checkbox"/> Driver Record <input type="checkbox"/> Photocopy of Driver License Document <input type="checkbox"/> Guarantor's Signature Search <input type="checkbox"/> Vehicle or Vessel - Current Record <input type="checkbox"/> Vehicle or Vessel History Yrs _____ <input type="checkbox"/> Owner as of ____ / ____ / ____ (MO.) / (DAY) / (YR.) <input type="checkbox"/> Certification <input type="checkbox"/> Other _____
<input type="checkbox"/> REQUEST FOR VEHICLE/VESSEL REGISTRATION INFORMATION Enter the vehicle/vessel license plate number, the vehicle/vessel identification number, OR the name of the individual.	
NAME (LAST) _____ (FIRST) _____ (MIDDLE) _____	
ADDRESS (CITY) _____ (STATE) _____ (ZIP CODE) _____	
CALIFORNIA DRIVER LICENSE NO. _____	BIRTHDATE MO. / DAY / YR. _____
VEHICLE/VESSEL IDENTIFICATION NO. _____	VEHICLE/VESSEL LICENSE NO. _____ MAKE _____ YEAR _____

▶ **NOTE: For verification purposes this section must be complete or your request will be refused.**

REASON FOR REQUESTING INFORMATION AND THE INTENDED USE (BE SPECIFIC. INCLUDE DATES, ADDRESS, COURT CASE NUMBER, LOCATION, ETC. RELATED TO YOUR REQUEST.)

Executed at _____ **on** _____

CITY COUNTY STATE DATE

I certify under penalty of perjury that the foregoing is true and correct and that the reason(s) I have given is factual for requesting information on the above and that the information received will not be used for any unlawful purpose and I understand that I may be subject to prosecution under Penal Code Section 118 for making a false statement.

X _____

SIGNATURE OF REQUESTER REQUESTER'S DRIVER LICENSE OR IDENTIFICATION CARD NO. PREFERRED

Complete mailing label below if making request by mail. Please submit the required fee (see reverse for fee schedule).

(DETACH HERE)

Send information to (Print Carefully)

Name _____

Address _____

STREET

CITY _____ STATE _____ ZIP CODE _____

YOU MAY SUBMIT THIS REQUEST TO YOUR LOCAL DMV OFFICE OR MAIL IT TO:

DEPARTMENT OF MOTOR VEHICLES
 P. O. Box 944247
 Sacramento, Ca 94244-2470

DRIVER LICENSE RECORD INFORMATION FEE SCHEDULE

Search for Driver License Number only by name and birth date	\$1.00
Search for Driver Record only by name and Driver License Number	\$1.00
Search for Driver Record by name and birth date	\$2.00
Guarantor's signature search by name and Driver License Number	\$3.00
Guarantor's signature search by name and birth date	\$4.00
Photocopy of Driver License documents	\$3.00
Certification of information (in addition to search fee)	\$1.00

VEHICLE/VESSEL INFORMATION FEE SCHEDULE*

Current record printout fee if the requester is the registered or legal owner	\$2.00
Current record printout fee if the requester is NOT the registered or legal owner	\$4.00
Request by Registered Owner's Name**	\$4.00
**Partial addresses only are provided. The full address may be obtained by inquiry on a specific Vehicle License number selected by the requester at a cost of \$4.00 per vehicle. Each inquiry is limited to a maximum display of fifteen names, ten vehicles for each name.	
Certification of information (in addition to search fee)	\$1.00
Owner As-Of (date) information in addition to search fee	per year \$5.00
Vehicle or Vessel History (photocopies of documents) in addition to search fee	per year \$5.00

Our formal retention period for documents is the current year and three prior years. We do not necessarily have hard copy documents in each year file. Records prior to the retention period may be available on special request for an additional fee.

It is **recommended** that a "not to exceed" \$25 check be prepared when requesting "owner as of" information or histories. This will enable the department to process your request more efficiently. In cases where the hard copy documents are not available it will eliminate the necessity for processing a refund. Refunds generally take 6-8 weeks before a check is issued. The department does not refund under \$3.00.

CODE FOR REGISTRATION PRINT OUT ABBREVIATIONS:

EXP - REGISTRATION EXPIRATION DATE	C.C.	
LIC # - LICENSE NUMBER	TYPE	
YRMD - YEAR MODEL	VEH	
BTM - BODY TYPE MODEL	BODY	... INFORMATION FOR DEPARTMENT USE
VIN - VEHICLE IDENTIFICATION NUMBER	CLAS	
R/O - REGISTERED OWNER NAME & ADDRESS	N.A.	
L/O - LEGAL OWNER NAME & ADDRESS		
SOLD - YEAR FIRST SOLD		
CYL - NUMBER OF CYLINDERS		
LOCD - NUMBERS 3, 5, 7, 9 INDICATE NO LEGAL OWNER		
RCID - REGISTRATION CERTIFICATE ISSUE DATE (PAPER ISSUE DATE)		
OCID - OWNERSHIP CERTIFICATE ISSUE DATE		

CODE FOR DRIVER LICENSE ABBREVIATIONS ON BACK OF COMPUTER GENERATED PRINT OUT