



NH DEPARTMENT OF SAFETY  
 DIVISION OF MOTOR VEHICLES  
 STEPHEN E. MERRILL BUILDING  
 23 HAZEN DRIVE, CONCORD, NH 03305

John J. Barthelmes  
 Commissioner of Safety

Director of Motor Vehicles

**RECORD CHANGE REQUEST**

1. INDICATE CHANGE DESIRED:  Name  Address  Both  Other

To change name, date of birth, sex, social security number or FEID, please submit this card with appropriate official supporting documents.

2. PRINT OR TYPE INFORMATION AS IT NOW APPEARS ON YOUR CURRENT DOCUMENTS:

Old Info ↓

Name (Last, First, MI):	Social Security or FEID
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Mailing Address:	Town/City:	State:	Zip:
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Legal Address:	Town/City:	State:	Zip:
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Height	Weight	Eye Color	Hair Color	Sex	Mo	Day	Date of Birth Year
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DO NOT WRITE IN THIS SPACE

3. PRINT OR TYPE ONLY NEW OR CHANGED INFORMATION: (Note that this request will change data on all Divisional records (Registration, Driver License, Title, etc.) and should be filed for *permanent* changes only.) If you wish to obtain a new driver license with this new address please submit this change document and a \$3.00 fee to the nearest DMV office.

New Info ↓

Name (Last, First, MI):	Social Security or FEID
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Mailing Address:	Town/City:	State:	Zip:
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Legal Address:	Town/City:	State:	Zip:
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Height	Weight	Eye Color	Hair Color	Sex	Mo.	Day	Date of Birth Year
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REASON FOR CHANGE:
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**Changes to donor information below can only be made directly at a State DMV Licensing Office.**

Check Here  To Consent to Organ & Tissue Donation pursuant to RSA 263:41  
 Donation information will be provided to federally-designated organizations so that your decision to donate may be honored.

Or check here  to remove your consent to Organ and Tissue donation.

SIGNATURE: \_\_\_\_\_  
 (Signed under penalty of unsworn falsification pursuant to RSA 641:3)

DATE: \_\_\_\_\_