APPLICATION FOR TENNESSEE DRIVER LICENSE

EXAMINER USE ONLY
DATE

-WARNING- IT IS A CRIMINAL OFFENSE TO GIVE FALSE INFORMATION ON THIS APPLICATION. IF CONVICTED, YOU COULD BE FINED, INCARCERATED, AND LOSE YOUR DRIVING PRIVILEGES. TCA 55-50-602

FIRST NAME	MIDDLE NAME (FULL)	LAST NAME	(SUFFIX)	DATE OF BIRTH MO. DAY YR.	STATE OF BIRTH	SOCIAL SECURITY NUMBER - -

ADDRESS WHERE YOU LIVE	APT #	PO BOX	CITY	ZIP CODE	COUNTY

SEX	RACE	EYES	HAIR	WEIGHT	HEIGHT
☐ MALE ☐ FEMALE	☐ BLACK ☐ INDIAN (AMER.) ☐ WHITE ☐ HISPANIC ☐ ASIAN ☐ OTHER	☐ BLACK ☐ BROWN ☐ GREEN ☐ BLUE ☐ GRAY ☐ HAZEL	☐ BALD ☐ BROWN ☐ GRAY ☐ BLONDE ☐ BLACK ☐ RED	LBS.	FT. INCHES

TELEPHONE (DAY TIME)	EMPLOYER NAME	U.S. CITIZEN?	GLASSES OR CONTACTS FOR DRIVING?	HEARING IMPAIRED?
		☐ YES ☐ NO	☐ YES ☐ NO	☐ YES ☐ NO

PLEASE ANSWER THE FOLLOWING QUESTIONS AND READ THE SUMMARIES OF LAW ON THE BACK.

				Departmental Use Only		
1. DO YOU HAVE, OR HAVE YOU EVER HAD A TENNESSEE DRIVER LICENSE, LEARNER PERMIT, OR ID? *NAME IF DIFFERENT:*	YES	NO	TN LICENSE NO.	Class	Status	Exp. Date
2. DO YOU NOW HAVE A DRIVER LICENSE, PERMIT, OR ID FROM ANOTHER STATE? STATE *NAME IF DIFFERENT:*	YES	NO	LICENSE NO.	Class	Status	Exp. Date
3. HAS YOUR PRIVILEGE TO DRIVE EVER BEEN SUSPENDED, REVOKED, CANCELED, OR DENIED? COUNTY STATE DATE	YES	NO	REASON FOR SUSPENSION, CANCELLATION, DENIAL			
4. DO YOU HAVE, OR ARE YOU BEING TREATED FOR, ANY PHYSICAL OR MENTAL DISABILITIES THAT WOULD INTERFERE WITH YOUR ABILITY TO DRIVE? *IF YES, EXPLAIN.*	YES	NO	EXPLANATION			
5. WOULD YOU LIKE TO REGISTER AS AN ORGAN DONOR TODAY? IF YES, LIST TISSUES/ORGANS BLOOD TYPE	YES	NO				
6. **WOULD YOU LIKE TO APPLY TO REGISTER TO VOTE OR UPDATE YOUR VOTER REGISTRATION INFORMATION TODAY?** SIMPLY MARKING YES ON THIS APPLICATION DOES NOT UPDATE YOUR VOTER REGISTRATION FILES.	YES	NO				
7. DO YOU GIVE YOUR CONSENT TO THE DEPARTMENT FOR RELEASE OF PERSONAL INFORMATION FROM YOUR RECORD? INDIVIDUAL LOOKUP ☐ YES ☐ NO MAILING ADVERTISING OPTION ☐ YES ☐ NO						
8. DO YOU WANT YOUR SOCIAL SECURITY NUMBER PRINTED ON YOUR LICENSE?	YES	NO				

I CERTIFY AND AFFIRM THAT I AM THE PERSON DESCRIBED HEREIN, THAT THESE STATEMENTS ARE TRUE, AND I UNDERSTAND THAT IT IS A CRIMINAL OFFENSE TO KNOWINGLY SUBMIT FALSE INFORMATION ON THIS APPLICATION. I HAVE READ AND WILL ABIDE BY THE FINANCIAL RESPONSIBILITY LAWS OF TENNESSEE. I HAVE READ AND UNDERSTAND THE SELECTIVE SERVICE LAW.

APPLICANT'S SIGNATURE

DEPARTMENTAL USE ONLY -- DO NOT WRITE BELOW THIS LINE

☐ Checked **EXAM DATA** ☐ Keyed

☐ Oral ☐ Written ☐ ATD ☐ English ☐ Other

CLASS D	Score	Pass	Fail	3rd Party	Badge #
Knowledge		P	F	3P	
For Hire		P	F		
Veh Cond		P	F		
Skills		P	F	3P	

CLASS M	Score	Pass	Fail	3rd Party	Badge #
Knowledge		P	F	3P	
Veh Cond		P	F		
Skills		P	F	3P	

CDL	Score	Pass	Fail	3rd Party	Badge #
GK		P	F		
Comb		P	F		
Air Brake		P	F		
N-Tanker		P	F		
T-Doubles		P	F		
H-HazMat		P	F		
P-Passngr		P	F		
S-Scl Bus		P	F		

CDL Skills	Score	Pass	Fail	3rd Party	Badge #
Pre Trip		P	F	3P	
Basic Ctrl		P	F	3P	
Road Test		P	F	3P	

VISION

☐ **With** ☐ **Without Lens**

LEFT	RIGHT	BOTH
20/	20/	20/

Color ☐ Red/Green ☐ Normal

Peripheral Degrees

☐ PASS ☐ Per Eye Statement

☐ FAIL #: _____

MEDICAL CARD	SSN
Exp. Date:	Verified:

SCREENING

ID Presented

BC: # _____

Other: _____

Badge #

PDPS

Results:

Verifying Unlock

REMARKS

END	REST
List All	List All
Delete	Delete

ATTACHMENTS

☐ Third Party No. _____
☐ Penalty Form ☐ Form 2-C
☐ Approval Letter ☐ Court Order
☐ JR-22/SR-22 ☐ Teenage Aff.
☐ Clearance Letter ☐ Truancy
☐ Other

CLASS LICENSE TO BE ISSUED: (Circle)

COMMERCIAL	> A B C S/CDL PA PB PC
REGULAR	> D H M PD PM
INTERMEDIATE	> IR IU
IDENTIFICATION	> ID PID

TAG NO. STATE

MAKE/MODEL/COLOR/YR

RETURN DATE

FEE CODES ☐ Keyed ☐ CHECK

LIC FEE	$	
LIC FEE	$	
APP	$	
LATE	$	
END	$	

P-CODE(S)

AMOUNT

$ Badge #

REFUND

$ Badge #

REMITTED

$ Badge #

ISSUANCE

☐ **ON LINE** ☐ **FAILED**

Badge # Badge #

☐ TEMP #

Circle type of temp:

Paper Only

Digitized Badge #

Station #

THIS IS NOT A LICENSE **THIS IS NOT A LICENSE** **THIS IS NOT A LICENSE** **THIS IS NOT A LICENSE**

SUMMARY OF TENNESSEE'S FINANCIAL RESPONSIBILITY LAW
TENNESSEE CODE ANNOTATED, TITLE 55

The law requires that you be advised of your obligations and how this law may affect your driving and vehicle registration privileges. The purpose of the law is to protect you and the public from financially irresponsible drivers who become involved in an accident, as well as from drivers who have repeated violations and disregard of the law.

Liability insurance provides coverage for damages you cause to other persons. **Uninsured motorist insurance** provides coverage for the damages uninsured persons cause you. State law requires your agent to offer you coverage against uninsured drivers.

1. IF YOU CONTRIBUTE TO A REPORTABLE ACCIDENT you may be required to establish financial responsibility for that accident. If so, you will be required to file an accident report with the Department of Safety. You will have to do one of these three things when you file your report: (1) show proof you had liability insurance at the time of the accident; (2) obtain notarized releases from all parties that file claims with the department; (3) post cash or corporate surety bond with the department for the amount of damages sustained by the other parties. IF YOU DO NOT COMPLY WITH THESE REQUIREMENTS YOU WILL HAVE YOUR DRIVING AND REGISTRATION PRIVILEGES REVOKED.

2. THE FINANCIAL RESPONSIBILITY LAW requires officers to ask drivers for proof of financial responsibility when they are charged with moving violations or involved in traffic accidents. Proof of financial responsibility is: evidence of liability insurance in effect at the time of the violation or accident; proof the driver has qualified as a self insurer with the Department of Safety; or proof the driver has posted a bond with the Department of Safety. If convicted of failure to have such proof in the vehicle, the driver may be fined $100.00 and the driver license will be suspended.

3. IF YOU DO NOT TURN IN A DRIVER LICENSE, VEHICLE LICENSE PLATE, OR VEHICLE REGISTRATION WITHIN 20 DAYS when any is revoked, suspended or canceled, you will owe the department a $75 fee in addition to other required reinstatement fees.

4. IF YOUR DRIVING PRIVILEGES ARE REVOKED DUE TO A CONVICTION OR FAILURE TO FILE SECURITY AFTER AN ACCIDENT, in addition to all other requirements you must have a liability insurance carrier file an SR-22 Form with this department before your privileges can be reinstated.

5. IF YOU HAVE ANY QUESTIONS REGARDING THESE LAWS, OR REGARDING YOUR OWN DRIVING PRIVILEGES, WRITE: The Tennessee Department of Safety, PO Box 945, Nashville, TN 37249-4000. or CALL THE TENNESSEE DRIVER INFORMATION line:

(615) 741-3954
or
TDD - Telecommunications Device for the Deaf (615) 532-2281

SUMMARY OF SELECTIVE SERVICE

By submitting this application, I am consenting to registration with the Selective Service System, if so required by Federal Law.

VOTER REGISTRATION

- You are NOT registered to vote until you receive your voter registration card.
- If you do apply to register to vote while applying for a driver license, your receipt will show the date you applied. If you have not received your voter registration card within three weeks, call your local election commission to follow up on the application status.

KEEP YOUR APPLICATION!

SAVE TIME!

- No need to fill out another application if you just need to bring some documentation, or clear up your driving record.
- **Remember to bring back all of your original documentation.**

NOTES: