

All ID cards used for voting are FREE

Check the box ID for FREE

APPLICANT - PLEASE PRINT

Applicant Name - First, Middle, Last				Birth Date (mm/dd/yyyy)		Social Security Number	
Residence Address - Street			Apt #	City	State	ZIP Code	County of Residence
Mailing Address - <u>ONLY IF DIFFERENT</u> from Residence			Apt #	City	State	ZIP Code	County of Residence
Sex	Race	Eyes	Hair	Weight	Height	Former Name (if changed since last license or ID card)	
1. Do you wish to register to be an organ, tissue and eye donor? YES <input type="checkbox"/>				Reason for Name Change		Marriage <input type="checkbox"/> Divorce <input type="checkbox"/> Other <input type="checkbox"/> List: _____	
Will you donate \$2 to organ, tissue and eye donation efforts? YES <input type="checkbox"/>				2. OPT OUT – Do you wish to have your name and address withheld from lists WisDOT sells? YES <input type="checkbox"/>		5. Check ONLY ONE of the following three boxes. I certify that I am a:	
3. Do you hold a valid driver license/identification card FROM ANOTHER STATE/COUNTRY? YES <input type="checkbox"/> NO <input type="checkbox"/>				If yes, list: _____		<input type="checkbox"/> U.S. Citizen <input type="checkbox"/> Permanent or Conditional Permanent Resident <input type="checkbox"/> Temporary Visitor	
4. ID for FREE – I certify that I am a U.S. citizen, will be at least 18 years of age by the next election and require a Wisconsin ID for free to vote. YES <input type="checkbox"/>				6. I am a veteran registered with WDVA and wish to have my veteran status indicated on my ID Card. YES <input type="checkbox"/>		(DMV is required to verify your status with WDVA.)	

I certify that the information on this application is true under penalty of perjury and I am a resident of Wisconsin. (s. 343.14(5) Wis. Stats.)

X _____
 (Applicant Signature) (Date – m/d/yyyy)

OFFICE USE ONLY				Application Type			
<input type="checkbox"/> REAL ID				<input type="checkbox"/> ORG <input type="checkbox"/> RNW <input type="checkbox"/> DUP <input type="checkbox"/> REI <input type="checkbox"/> RSM			
Date		Processor ID		Payment			Amount
				<input type="checkbox"/> Check <input type="checkbox"/> Cash <input type="checkbox"/> CC <input type="checkbox"/> Acct.			\$
Wisconsin or Out-of-State License Number		State	Expiration Date		X _____ (Processor Signature) (Date)		
Legal Presence	Name/DOB Proof	Identity/SS Proof	Residency Proof				



DMV ADMINISTRATOR PETITION – Unavailable Documentation

Wisconsin Department of Transportation (WisDOT)
MV3012 9/2014

Use of this form is authorized, pursuant to Wisconsin Administrative Code § Trans 102.15(3)(b), for a photo identification card for voting purposes that complies with 2011 Wisconsin Act 23, s. 343.50(5)3., and any other applicable requirements. *“Unavailable” does not include documents which persons have forgotten to bring with them when applying for an identification card.*

This process is available if any of the following applies:

- 1) Applicant is unable to provide documents for proof of name and date of birth required by Wis. Admin. Code § Trans 102.15(3)(a) which require a fee to a government agency to obtain. This includes documentation needed for proof of legal name change.
- 2) Applicant is unable to provide documents for proof of United States citizenship required by Wis. Admin. Code § Trans 102.15(3m) which require a fee to a government agency to obtain.

A. To facilitate the document search process for United States born citizens, please provide the following:

Please be advised that complete birth record information improves the search process with Vital Records.

Birth Name – First		Middle	Last (as it appears on the birth certificate)
Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	Birth Date (mm/dd/yyyy)	Place of Birth (State/Jurisdiction/Territory)	
Place of Birth – County or Equivalent (Parish – LA, Borough – AK)		Place of Birth (City, Village or Township)	
Mother’s Name – First	Mother’s Middle	Mother’s Last — Maiden Name (as it appears on the birth certificate)	
Father’s Name – First	Father’s Middle	Father’s Last (as it appears on the birth certificate)	
Is your current name different than that on your birth record <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, What is Your Current Legal Name:			

B. For United States citizens, not born in the United States, who do not have the appropriate documents available, please provide the following United States Customs and Immigration Service (USCIS) identifiers. This information will be used to verify citizenship status with the Department of Homeland Security.

Alien/USCIS Number	Citizenship Certificate Number
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The information on this petition application must be true under penalty of perjury and I am a resident of Wisconsin. (s. 343.14(5) Wis. Stats.)

X

(Signature of Applicant)

(Date Signed – m/d/yyyy)

Contact Information

Email Address	(Area Code) Telephone Number
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Wisconsin DMV or Vital Records may contact you for any follow-up information which may be necessary to complete the verification process.

— Official Use Only —

Envelope Number	DID	L1 Number
Vital Records Search <input type="checkbox"/> Verified <input type="checkbox"/> Not Verified	Date (m/d/yyyy)	Processor ID