STATE OF CALIFORNIA DMV DEPARTMENT OF MOTOR VEHICLES
A Public Service Agency

**MAIL COMPLETED FORM TO:**
**DMV CHANGE OF ADDRESS**
**P. O. BOX 942859**
**SACRAMENTO, CA 94259-0001**

# NOTICE OF CHANGE OF ADDRESS

***Read the instructions carefully***

DMV USE ONLY
DL address updated by FO
24002

**Please Print Characters Only In Capital Letters Using Black or Blue Ink.**

1 2 3 4 5 6 7 8 9 0  A B C D E F G H I J K L M N O P Q R S T U V W X Y Z

A separate form is needed for each driver or vehicle owner. Enter the information exactly as shown on your California driver license, ID card, disabled person placard, registration card or certificate of number for which a change or correction is being requested. DMV cannot update unreadable or incomplete information. Type or write your new address on a small piece of paper or card, sign and date the card, and keep it with your driver license or ID card.

**Personal Information**

LAST NAME

DRIVER LICENSE/ID CARD NO.

FIRST

INITIAL

BIRTH DATE M M — D D — Y Y Y Y

**Voter Change of Address (Use only with DL Change of Address)**

**FOR REGISTERED VOTERS ONLY**

We will change your voting address if you have moved and still live in the same county. If you have moved to a new county or are not registered to vote, you must complete a new voter registration card. DMV provides the form or call 1-800-345-VOTE.

X N No, I do not want you to change my voting address.

**New or Correct Residence Address Do No Use P. O. Box**

STREET NUMBER

STREET NAME

APT NO.

CITY - DO NOT ABBREVIATE - USE FIRST 22 CHARACTERS IN CITY NAME

STATE

ZIP CODE

**New or Correct Mailing Address (If Different From Residence Address Above)**

STREET NUMBER

STREET NAME

APT NO.

CITY - DO NOT ABBREVIATE - USE FIRST 22 CHARACTERS IN CITY NAME

STATE

ZIP CODE

**Vehicles or Vessels Owned By You (Use Additional Forms If Necessary)**

CALIFORNIA PLATE/CF/PLACARD NO.

LAST 17 POSITIONS OF VEHICLE ID OR VESSEL HULL ID NUMBER

CHECK IF LEASED

X

X

X

**Leased Vehicles**

LEASING COMPANY'S NAME

**Location of Trailer Coach or Vessel (If Different From Residence Address)**

STREET NUMBER

STREET NAME

CITY - DO NOT ABBREVIATE - USE FIRST 16 CHARACTERS IN CITY NAME

COUNTY - DO NOT ABBREVIATE

**Previous Address**

STREET NUMBER/NAME  CITY  STATE  ZIP CODE

Your mailing address may be given to requesters providing a valid reason for requesting the information. If you receive mail at your residence, then giving DMV a separate mailing address is optional. Your residence address is restricted to authorized requesters per Vehicle Code Section 1808.22. I am the person whose name appears on the record(s) above and the mailing address shown is valid, existing and accurate. I consent to receive service of process at this mailing address pursuant to 415.20(b), and 416.90 of the Civil Procedure Code. I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE
X

M M — D D — Y Y Y Y