



**STATE OF OHIO - BUREAU OF MOTOR VEHICLES  
APPLICATION FOR DRIVER'S LICENSE**

DL NO: [REDACTED]      ISSUE DATE: 04/27/2011      SSN: [REDACTED]      APP NO: TX578309  
 TRANS: RENEWAL      AGENCY: 3170      USER ID: MH

NAME: [REDACTED]      CLASS: OPERATOR      ENDORSEMENT(S):      EXP DATE: 04/01/2015  
 ADDRESS: [REDACTED]  
 CITY/ZIP: [REDACTED] 45248  
 COUNTY: 31-HAMILTON  
 RESIDENT: OH      YRS: 59  
 U.S. CITIZEN: YES

RESTRICTION(S): B      LATE FEE: \$20.00

VISION FEE: \$2.75

LAMINATION FEE: \$1.50

DL/ID FEE: \$18.00

\*DEPUTY FEE: \$3.50

TOTAL FEES: \$45.75

\*If Applicable

DOB: 04/01/1952      SEX: MALE  
 HEIGHT: 5'9"      WEIGHT: 190  
 HAIR: BROWN      EYES: BLUE      VISION SCREENING PASSED

I DO have a current driver license or I.D. card from Ohio ID# [REDACTED] Exp 04/01/2011  
 I do NOT have driving privileges now suspended or revoked or cancelled or otherwise disqualified or subject to an out of service order in this state or any other state.  
 I do NOT have a pending citation for a violation of any motor vehicles law or ordinance in this or any other state.  
 I do NOT have a condition that results in episodic impairment of consciousness or loss of muscular control.  
 I do NOT have a physical or mental condition that prevents me from exercising reasonable and ordinary control of a motor vehicle.  
 I am NOT chemically dependent on alcohol or a drug of abuse or currently using alcohol or a drug of abuse.

**PROOF OF FINANCIAL RESPONSIBILITY**

**I affirm that I now have insurance or other proof of financial responsibility (FR Proof) and that I will not operate any motor vehicle without FR Proof. (O.R.C. 4509.101)**

By signing below I agree to and attest that all the above is true and accurate.

04/27/2011

SIGNATURE

DATE

**WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2913.42.  
APPLICATION INFORMATION AND SIGNATURE(S) ALSO CAPTURED ELECTRONICALLY**