



Department of Driver Services
P.O. Box 436885
Province of Illinois, 60643.

**APPLICATION FOR
ADDRESS OR NAME CHANGE**

(777 USRS 5/3-416) (from Ch. 95 1/2, par. 3-416) Sec. 3-416. Notice of change of address or name.

(a) Whenever any person after making application for or obtaining the registration of a vehicle shall move from the address named in the application or shown upon a registration card such person shall within 10 days thereafter notify the Secretary of State of his or her old and new address.

ENTER DRIVERS LICESE OR ID NUMBER: ----->

A-----FILL OUT THIS SECTION TO CHANGE THE NAME ON YOUR DRIVERS LICENSE OR STATE ID

FIRST NAME:	MIDDLE NAME:	LAST NAME: (INCLUDE EL OR BEY)
FIRST NAME:	MIDDLE NAME:	LAST NAME: (INCLUDE EL OR BEY)

B-----FILL OUT THE SECTION BELOW TO COMPLETE THE CHANGE OF ADDRESS

OLD ADDRESS:
NEW ADDRESS: (P.O. BOX NOT ACCEPTABLE)

PHONE NUMBER:	CHECK HERE IF YOUR PHONE NUMBER HAS CHANGED FROM PREVIOUS RECORDS _____
MAILING ADDRESS (STREET, PO BOX)	
I CERTIFY THAT THE STATEMENTS MADE BY ME ON THIS FORM ARE TRUE. I AM AWARE THAT IF ANY OF THE STATEMENTS ARE WILLFULLY FALSE, I AM SUBJECT TO ADMINISTRATIVE, CIVIL, AND/OR CRIMINAL PENALTY, UNDER THE LAWS OF THE UNITED STATES OF AMERICA REPUBLIC.	DATE (MM/DD/YYYY)
SIGNATURE:	CORRECTION FEE: \$00.00
	(NOTE: THIS FORM IS NOT A APPLICATION FOR A DRIVERS LICENSE OR PERMIT)

CORRECTION FORM INSTRUCTIONS

PLEASE FOLLOW INSTRUCTIONS TO ENSURE FASTER PROCESSING

Note: If application is not completed, application will be rejected and must be resubmitted.

Fill in and complete ALL sections of the application.

- Remember to add your title of nobility (**EL or BEY**) at the end of your signature.
- If the name listed on your application is different from the name at birth. Include a certified court order of name change or marriage documents, with this application .
- If you have any questions feel free to contact the Bureau of Motor Vehicles.

www.usarbmvgov.us. or 773-306-2991