

Idaho Change of Address Request



This form changes both the driver's license address and the vehicle registration address as needed.

Mail Completed Form To: Driver Services
Idaho Transportation Department
PO Box 7129
Boise ID 83707-1129

Or

- Leave at any county driver's or auto license office
- Fax to: (208) 334-8586
Forms are available at dmv.idaho.gov

For State Use Only

Please Type or Print All Information

Full Legal Name		Former Name (If Recently Changed)	
Idaho Driver License/ID Card Number	Driver License/ID Card Receipt Number	Date of Birth	
License Plate Number (1 st Vehicle)	License Plate Number (2 nd Vehicle)	License Plate Number (3 rd Vehicle)	License Plate Number (4 th Vehicle)

Pursuant to Sections 49-320, 49-421, and 49-2444, Idaho Code, I request that my address now listed with the Idaho Transportation Department be changed to read as follows: (If you have a post office box number or general delivery address, you must also list your physical address.)

Physical Address		City	State	Zip Code
			Idaho	
Mailing Address (If Different Than Physical Address)		City	State	Zip Code
Date	Signature			