



OHIO BUREAU OF MOTOR VEHICLES
CHANGE OF ADDRESS INFORMATION (PLEASE PRINT)

CURRENT DRIVER LICENSE NUMBER		DATE OF BIRTH / /
NAME SHOWING ON LICENSE (FIRST)	MIDDLE INITIAL	LAST
PREVIOUS ADDRESS (STREET)	CITY	ZIP CODE
NEW ADDRESS (STREET)	CITY	ZIP CODE

SIGNATURE X _____

Date _____

BMV 2029 12/96 **THE INFORMATION SUPPLIED WILL BE USED TO UPDATE YOUR DRIVER RECORD ONLY.**

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Please mail this form to the following address:

OHIO BUREAU OF MOTOR VEHICLES
ATTN. RECORD CLEARANCE
P.O. BOX 16784
COLUMBUS, OHIO 43266-0084