INSTRUCTIONS FOR THE

UNITED STATES OF AMERICA REPUBLIC DRIVER'S LICENSE CORRECTION APPLICATION

INSTRUCTIONS FOR COMPLETING AND SUBMITTING A PAPER DRIVER'S LICENSE CORRECTION APPLICATION

The instructions apply to nationals and citizens who are completing and submitting an United States of America Republic Driver's License correction application. They do not provide technical procedures for people with disabilities who are using assistive equipment.

UNITED STATES OF AMERICA REPUBLIC

BUREAU OF MOTOR VEHICLES (BMV)

DRIVER'S LICENSE / IDENTIFICATION CORRECTION APPLICATION INSTRUCTIONS

(Based on Form # USARBMV-CA041416)

✓ 1. PURPOSE OF THIS APPLICATION

This application is used **ONLY** to correct information on an existing:

- Driver's License, or
- Identification Card

Typical corrections include:

- Legal name change
- Address change
- Corrections to personal information (e.g., height, weight, eye color)

The form allows you to obtain a **corrected license or ID** when changes or errors must be officially updated.

BMV DL - Identification Correction

✓ **This is NOT an application for a new license or permit.**

✓ 2. WHO CAN APPLY

You may apply if:

1. You currently hold a U.S.A.R. Driver License, Permit, or ID, and
2. You need a correction to your information.

If your original license is available, it **must accompany the application**. If it is lost or destroyed, you must provide satisfactory evidence.

✅ 3. REQUIRED INFORMATION

You must fully complete all sections of the form. Incomplete applications will be rejected and must be resubmitted.

Information required includes:

- First Name
- Middle Name
- Last Name
- Suffix (including **El** or **Bey if applicable**)
- Suffix (if applicable)
- Contact Information
- Physical Address (**P.O. Boxes not accepted**)
- Mailing Address (if different)
- Date of Birth
- Sex
- Height & Weight
- Eye Color

You must also check the box if your address has changed from previous records.

✅ 4. NAME CHANGE REQUIREMENTS

If the name listed on the application is **different from your birth name**, you must include a **certified court order of name change**.

✅ 5. EVIDENCE OF ADDRESS CHANGE

If you are correcting your residence address, you must **provide evidence of address change**.

✅ 6. SELECT DOCUMENT TYPE

On the form, select one:

- ☐ Driver's License
- ☐ Identification Card

This form **cannot** be used for:

- Renewals
- New applications
- Replacement of lost/stolen cards (use the replacement form instead)

✅ 7. FEES

A **$25.00 correction fee** is required.

Fees are non-refundable once processing begins.

✅ 8. SUBMISSION INSTRUCTIONS

You may submit the application:

- By **fax or email** for quicker review
- BUT a **hard copy is REQUIRED** for original filing

  BMV DL - Identification Correct…

Make a copy for your personal records.

✅ 9. FINAL CHECKLIST

Before submitting, confirm:

☐ All sections completed
☐ Signature in black ink
☐ "El" or "Bey" included if applicable
☐ Right thumbprint provided
☐ Certified name change order attached (if required)
☐ Evidence of address change attached
☐ $25.00 fee included
☐ Hard copy prepared
☐ Personal copy made

✅ 10. QUESTIONS OR ASSISTANCE

For help, contact the U.S.A.R. Secretary of State Office:

🌐 www.usarbmvgov.us
📞 888-234-4743

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

Correction Application for Drivers License / Identification

(777 USRS 5/6-114) (from Ch. 95 1/2, par. 6-114) Sec. 6-114. Duplicate and Corrected Licenses and Permits.

Note: The person to whom has been issued a drivers license or permit under the provisions of this Act and who desires to obtain a corrected permit or license to indicate a correction of legal name or residence address or to correct a statement appearing upon the original permit or license may upon application and payment of the required fee obtain a corrected permit or license. The original permit or license must accompany the application for correction or evidence must be furnished satisfactory to the Secretary of State that such permit or license has been lost or destroyed.

DRIVER LICENSE / NON-DRIVER ID NUMBER

FIRST NAME:					
MIDDLE NAME:					
LAST NAME: (INCLUDE EL OR BEY)			**SUFFIX:**		
CONTACT:	**Alternate Number:**		CHECK HERE IF YOUR ADDRESS HAS CHANGED FROM PREVIOUS RECORDS _____		
MAILING ADDRESS *(STREET, PO BOX)*			**PHYSICAL ADDRESS** - *(P.O. BOX NOT ACCEPTABLE)*		
PROVINCE STATE (#)	ZIP		PROVINCE STATE (#)	ZIP	
FULL DATE OF BIRTH (MM/DD/YYYY)	SEX	EYE COLOR	HEIGHT	WEIGHT	
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. SIGNATURE:			DATE (MM/DD/YYYY) **SELECT ONE:** DRIVERS LICENSE \ IDENTIFICATION **CORRECTION FEE:** $25.00 **(NOTE: THIS FORM IS NOT A APPLICATION FOR A DRIVERS LICENSE OR PERMIT)**		