

NOTICE OF CHANGE OF ADDRESS

NOTE: This form will only update the address on your driving record.

If you want your new address to appear on your Driver License, you will need to apply for a new one.

FULL NAME (as shown on driver license or ID card) DATI			DATE OF BIRTH			
DRIVER LICENSE OR ID CARD NU	PHON	PHONE NUMBER				
EMAIL ADDRESS						
MAILING ADDRESS	CITY	STATE		ZIP CODE		
PHYSICAL ADDRESS	CITY	STATE		ZIP CODE		
Do you need to update your Next of Kin (Emergency Contact) information? Please fill out the information on the back.						
I certify that the above is my new address, and authorize the Department to change records listed under my name in their driver record files.						
SIGNATURE			ATE	Ë		
Email to: renewals@wyo.gov	OR Drop form by your local	Driver Services office	OR Mail to	: WYDOT Driver Services		
or Fax to : 307-777-3823	, ,,		\dashv	5300 Bishop Blvd		
FSDL-763 20190715	Questions? Call Driver Servi	ces at 307-777-4806		Cheyenne, WY 82009-3340		

NEXT OF KIN (EMERGENCY CONTACT) INFORMATION

RELATIONSHIP TO APPLICANT	EMERGENCY CONTACT FULL NAME		CONTACT PHONE (Including area code)		
EMERGENCY CONTACT RESIDENTIAL ADDRESS			ALTERNATE NUMBER (Including area code)		
		l			
I designate the above individual as my Next of Kin (Emergency Contact), and authorize emergency personnel or law enforcement to contact this person in the event I am unable to do so myself.					
APPLICANT NAME (Please print)		DATE			