



Matthew H. Mead  
Governor

# WYOMING Department of Transportation

"Providing a safe, high quality, and efficient transportation system"

5300 Bishop Boulevard, Cheyenne, Wyoming 82009-3340



William T. Panos  
Director

## Forwarding Request

**Instructions: Please print clearly and legibly.**

Today's Date: \_\_\_\_\_

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Driver License or ID  
Card Number (if known): \_\_\_\_\_

Please initial **ONE** of the options below.

\_\_\_\_\_ **CHANGE OF ADDRESS & FORWARDING REQUEST:** I am authorizing the Department to forward my license/identification card to the following address AND authorizing the Department to change records listed under my name in their driver record files to the following address.

\_\_\_\_\_ **FORWARDING REQUEST ONLY:** I am authorizing the Department to forward my license/identification card to the following address, but do not desire a change of address.

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City State Zip

Signature: \_\_\_\_\_

Please return completed form to: Wyoming Department of Transportation, Driver Services, 5300 Bishop Blvd., Cheyenne, WY 82009, email to [renewals@wyo.gov](mailto:renewals@wyo.gov), or fax to 307-777-3823.