

Mbertan Remote Driver's Licence/ID Card Application

Affix Supporting Document Label Here

Protected B (when completed)

In accordance with the Traffic Safety Act (TSA) and the Operator Licensing and Vehicle Control Regulation, when making an application for a motor vehicle service, the Registrar of Motor Vehicle Services will collect specific personal information to confirm the identity and eligibility of an individual for motor vehicle services and for motor vehicle records held by Motor Vehicles in the administration of the *TSA*. Information and numbers from personal documents recorded on this form are not copied to any other Motor Vehicle database and serve as a source of information should a future investigation into your service be required, (i.e. identity theft). Questions about the collection of your personal information can be directed to Alberta Registries, Box 3140, Edmonton AB T5J 2G7 or 780-427-7013, toll free 310-0000 within Alberta.

	Applicant Informat t Last Name		Applicant First Name			Applicant Middle Name		Driver's Licence Number or MVID	
Date of	Year Moi	∟_ nth Day	Contact F	Phone Numb	ner ner	Email Address (if v	you would like a copy o	of the interim lice	ense/ID receipt sent)
Birth:						Email Address (if you would like a copy of the interim license/ID receipt sent)			
D D									
	Service Type and vious driver's license of	_) Expired (∩ Lost	or Stolen			
	ave any current or pre			•	_		safe operation of a mo	otor vehicle?	○ No. ○ Yes
-	Method (select one):	_		-	-			,	O 110
-	o address on file						9		
Send	to registry agent for p	ickup by autho	orized individua	al					
Nan	me of Authorized Indiv	ridual	<u>l</u>				Telephone Number		
○ Mail to	o alternative Alberta a	address						<u> </u>	
Ŭ	ernative Alberta Addre		City or Town				Province		Postal Code
Aite	mative Alberta Addre	33			VVII		Alberta		1 ostal code
							Alberta		
Part C -	Additional Inform	ation and S	upporting De	ocuments -	- See a	lberta.ca for mo	re information		
	ace below, please pro		-						
m and ope	200 Dolow, ploace pro		- одраналон о	T Willy you all	o dilabio	- to attoria a region)	y agont in porcon		
I have attached a copy of my:		Valid	Valid Photo Identification Val			lid Non-Photo Identification Proof of Alberta Residency			
		Medic	Medical Report (if applicable)			etter from Physician or Care Facility (if applicable)			
For individuals outside of Alberta:		ta:	Date you left Alberta:			Date of return			
		I				m-dd	to Alberta:	у	yyy-mm-dd
Part D -	Declaration							·	
For all ap	oplicants								
I declare	that (applicant to initia	al each line):							
	I understand that I me	ust provide pro	oof of Alberta r	esidency and	d Canad	ian legal presence	at the time of my nex	t driver's licenc	ce or ID card service.
	The information on a	ny documents	provided in su	pport of this	applicati	on are true, correct	t and authentic.		
	I am lawfully entitled	to be or to ren	nain in Canada	and make n	my home	in, and ordinarily p	oresent in, Alberta.		
	I understand that pro	viding inaccur	ate and/or fals	e information	n may re	sult in prosecution.			
For drive	er's licence applicant	ts only							
	declare that (applicant	•	line)						
	I am not prohibited o			erating a mo	otor vehic	ele in any jurisdiction	n.		
	I acknowledge that it operator's/driver's lice						cence and I have disc	closed any oth	er subsisting
	I have disclosed any	current or pre	existing medi	cal condition	ns or disa	bility that may inter	rfere with the safe op	eration of a mo	otor vehicle.
			-			-	•		
	Date yyyy-mi	m-dd					Signature		

REG11197 Rev. 2020-12 Page 1 of 1