Change of Address for Driver License or ID Card (Electronic Record)

Attn: Records Division P.O. Box 201430 Helena, MT 59620-1430 ● Phone (406) 444-3933 ● Fax (406) 444-3816 ● dojmt.gov/driving

This form updates only your electronic record. There is no fee for this service.

Montana law mandates that the Motor Vehicle Division be notified within 10 days of any address change.

If you want your new mailing address to show **on** your photo driver license, you must:

- Go to a Montana driver license bureau location for a replacement driver license. For faster service make an appointment online at dojmt.gov/driving/appointments.
- Pay the $10 replacement driver license fee at the driver license bureau location.

Current Driver License Information

Last Name on License	**First** Name on License	**Middle** Name	Suffix *(Jr., Sr., 1st, etc.)*

Date of Birth (mm/dd/yyyy)	MT Driver License Number	Daytime Phone Number or Email Address

New Mailing Address (License will be mailed here)	City	State	Zip Code

New Residential Address	City	State	Zip Code

You can visit the Montana Secretary of State "My Voter Page" to check if you are registered to vote, check your voter registration address, and find the location and directions to your polling place at: https://app.mt.gov/voterinfo/.

Your decision to register to vote or not, and where you submitted this form, will remain confidential.

Do you want to register to vote in Montana or update your voter registration? Yes ☐ No ☐

If "NO" STOP! If yes, continue on.

County you are registering to vote in:_____

Check all that apply: ☐ New Registration ☐ Name Change ☐ Address Change

Are you a citizen of the United States?* Yes ☐ No ☐

Will you be at least 18 years of age on or before the next election?* Yes ☐ No ☐

Will you be a Montana resident for at least 30 days before the next election?* Yes ☐ No ☐

If you checked "No" in response to any of these questions STOP do not complete this form.

Previous Registration Information – will be used to provide cancellation information to former jurisdiction. Required if name changed or if previously registered to vote in another MT county or in another state.

Previous Registration Name		Residence Address of Previous Registration	
Previous City	Previous County	Previous State	Previous Zip

Voter Applicant Affirmation

I affirm under penalty of perjury that the information on this application is true, that I am a citizen of the United States, that I will be at least 18 years old on or before the next election, that I will have been a resident of Montana for at least 30 days prior to the next election, and that I am not serving a felony conviction in a penal institution nor have been found to be of unsound mind by a court. I understand that if I have given false information on this application, I may be subject to a fine or imprisonment, or both, under federal and/or state law. By signing you authorize the Motor Vehicle Division to use your electronic signature for voter registration purposes.

Signature* _____ Date* _____

*The affirmation on this application for voter registration must be signed by the applicant. Failure to do so will prevent application from being processed.

Montana state authorities reserve the right to reject any form that has been altered.

This form is available in alternate formats for people with disabilities.