# Department of Motor Vehicles **NEW YORK**

## ADDRESS CHANGE

Change your address online at dmv.ny.gov

### **INSTRUCTIONS TO UPDATE YOUR ADDRESS**

New York State (NYS) law requires you to notify DMV within 10 days of any PERMANENT address change if you have a NYS driver license, learner permit or non-driver ID card, or a NYS registration for a vehicle, boat, or snowmobile. Do NOT report a temporary address change.

- You can change your address online at dmv.ny.gov or use this form.
- · Write your new address on your current regular or enhanced NYS license, permit, or non-driver ID card and on your NYS registration document.
- If your regular or enhanced NYS license, permit, non-driver ID card or registration will expire within the next 75 days, call DMV Monday through Friday from 8:00AM to 4:00PM at any of the numbers listed below for information about how to change your address at the same time you renew your document by mail:

Upstate New York: (518) 486-9786

New York City (from area codes 212, 347, 646, 718, 917 or 929): (212) 645-5550, or (718) 966-6155 Other Downstate Areas and Long Island (from area codes 516, 631, 845, or 914): (718) 477-4820

From Outside New York State: (518) 473-5595

• If you change your address, you do not have to get a new license, permit, non-driver ID card, or registration document, but you have the option to get a new document.

If you want a new document, complete Part 1 and Part 2 on page 2 of this form, sign your name in the "Certification" section, and mail your completed form with your payment to DMV at the address shown below. Keep your current document(s) until you receive your new document(s) in the mail in 4 to 6 weeks. If you request an enhanced license, permit, or ID card, your residence address will be shown on your document and your document will be mailed to your mailing address. If you request a regular license, permit, or ID card, your mailing address will be shown on your document.

If you DO NOT want a new document, complete Part 1 but do not complete Part 2. DMV will update your DMV record(s) at no cost.

- If you moved to NYS from a location outside of NYS, you can find information about how to get a NYS driver license, permit, non-driver ID card, an enhanced version of those documents, and a vehicle registration at dmv.ny.gov or you can call DMV Monday through Friday from 8:00AM to 4:00PM at any of the telephone numbers listed above.
- If you have unpaid Traffic Violations Bureau (TVB) tickets, you must use this form to report your address change. You must call TVB to provide your new address and make arrangements to pay your fines. In the downstate area, call (718) 488-5710. In the Buffalo and Rochester area, call (518) 474-0941. A list of all TVB office locations can be found at dmv.ny.gov/tvboffice.htm.
- Complete and sign this form. If you want to purchase a replacement document, write a check or money order made payable to "Commissioner of Motor Vehicles" for the total fee. Mail the completed, signed form and, if applicable, a check or money order to:

**NYS DMV License Production Bureau** PO Box 2895 Albany, NY 12220-0895

#### NEW YORK STATE VOTER REGISTRATION APPLICATION INFORMATION

(Please read before you complete the NYS Voter Registration application on Page 2.)

Use the NYS Voter Registration Application to Register to Vote in NYS Elections, and/or:

Use the NYS Voter Registration Application to Register to Vote in NYS Elections, and/or:

- change the name or address on your voter registration
- become a member of a political party
- change your party membership
- pre-register to vote if you are 16 or 17 years of age

#### To Register You Must:

- be a U.S. citizen
- be 18 years old (you may pre-register at 16 or 17 but cannot vote until you are 18)
- not be in prison or on parole for a felony conviction (unless parole pardoned or restored rights of citizenship)
- not claim the right to vote elsewhere
- not found to be incompetent by a court

Información en español: si le interesa obtener este formulario en español, llame al 1-800-367-8683

中文資料:若您有興趣索取中文資料表格, 請電: 1-800-367-8683

한국어: 한국어 양식을 원하시면 1-800-367-8683 으로 전화 하십시오. 1-800-367-8683 লয়রে ফোল কর্ল

যদি আপনি এই ফর্মটি বাংলাতে পেতে চান তাহলে

OFFICE USE ONLY

If you do not complete the New York State Voter Registration Application, you will be considered to have declined to register to vote. If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for voter registration purposes. If you do register to vote, the office at which you submit a voter registration application will remain confidential and will only be used for voter registration purposes. If you believe that someone has interfered with your right to register or decline to register to vote, your right to privacy in deciding whether to register or in applying to register to vote, or your right to choose your own political party or other political preference, you may file a complaint with the New York State Board of Elections, 40 North Pearl Street, Albany, NY 12207-2729 (phone: 1-800-469-6872).

Your completed application will be sent to the Board of Elections and you will be notified by your County Board of Elections when your application has been processed. If you have any questions about filling out the voter registration application or registering to vote, you should call your County Board of Elections or call 1-800-FOR-VOTE (TDD/TTY enter 711) (only for voter registration questions). If you live in New York City, you should call 1-866-VOTE-NYC. You may also find answers or tools at the New York State Board of Elections website www.elections.ny.gov

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# ADDRESS CHANGE

| MV-232 (1/20) PAGE 2   | OF Z   | ADDILL   | )                | 7110           |             |  |                         | change your aa                     | aress online at aniv         | .ng.gov            |
|--|--|--|------------------|----------------|-------------|--|-------------------------|------------------------------------|------------------------------|--------------------|
| PART 1 - Complete  | this section to CHAN   | IGE YOUR ADD   | DRESS            |                |             |  |                         |                                    |                              |                    |
| that must be changed   | n in Part 1 that applies to<br>to show your new addre<br>ed) License/Permit/Non-I      | ess.   | ent that you     |                |             |  |                         | _                                  | ocument that you has         | ve and             |
| IMPORTANT: If you are a  | registered to vote, your vote  | er registration recor  | d will be upda   | ated whe       | n you cor   | nplete a                                       | and submit              | this form. If you                  | do NOT want your new         | v address          |
|  | the box, you   | he box, your new address will be sent to the Board of Elections of your county of residence.  TELEPHONE NUMBER |                  |                |             |  |                         |                                    |                              |                    |
| LICENSE/PERMIT/N   |  |  | <u> </u>         |                |             | ( )<br>DATE OF BI                              | DTH GE                  | ENDER                              |                              |                    |
| • •  | Enter the ID number as it is proof your license, permit or non-                        |  |                  |                |             |  |                         | DATE OF BI                         | 1                            | _<br>]м □ <u>г</u> |
| NAME (Print your name - I  | Last, First, MI)   |  |                  |                |             |  |                         |                                    |                              |                    |
| NEW ADDRESS - WHERE  | YOU GET YOUR MAIL ( <i>Re</i>  | <b>quired -</b> Include Stre   | et No. and Nai   | me, Rural      | Delivery, I | Apt. No.,                                      | and/or P.C              | D. Box No. Also fill in            | residence address below      | v.)                |
| CITY OR TOWN   |  |  |                  |                | STATE<br>   | STATE ZIP CODE COUNTY                          |                         |                                    |                              |                    |
|  | E YOU LIVE ( <b>Required -</b> Incl  | lude Street No. and N  | lame, and Apt    | t. No.)        |             |  | T                       |                                    |                              |                    |
| CITY OR TOWN   |  |  |                  |                | STATE<br>   | ZIP CODE                                       | COUNTY                  |                                    |                              |                    |
| PREVIOUS NYS ADDRES  | SS (Include Street No. and Na  | nme, Rural Delivery, A   | Apt. No., and/o  | r Box No.,     | CITY O      | R TOWN   | N                       |                                    | COUNTY                       |                    |
|  | vide the information be  |  |                  | <b>your</b> na | ame.        |  |                         |                                    |                              |                    |
| License Plate No.  | - ''   | egistration (Mark  |                  |                |             | <u>.</u>                                       | Поп                     | <u> </u>                           |                              |                    |
|  | ☐ Passenger☐ Passenger☐  | ☐ Commercial ☐ Commercial  | ☐ Snow           |                | Bo          |  | Other Other             |                                    |                              |                    |
|  | ☐ Passenger  | ☐ Commercial   | ☐ Snow           |                | □во         |  | Other                   |                                    |                              |                    |
|  | ☐ Passenger  | ☐ Commercial   | ☐ Snow           |                | В           |  | Other                   |                                    |                              |                    |
| Sign Here: X  Sign Name in Full  Date  WARNING! Knowingly providing false information on this form is a misdemeanor and will result in penalties authorized by law.  |  |  |                  |                |             |  |                         |                                    |                              |                    |
| PART 2 Complete t  | his section to PURC  | HASE A REPLA   | CEMENT           | DOCU           | MENT T      | HAT S  | SHOWS                   | YOUR NEW A                         | DDRESS                       |                    |
|  | h type of document th<br>count holder's name poner Permit                              |  |                  | , payabl       | e to "Co    | mmiss  |                         |                                    |                              | ) with a           |
| ☐ Driver License☐ Learner Perm   | Non-Driver ID Card (Fee: \$8.00)*  |  |                  |                |             |  |                         |                                    |                              |                    |
| Registration(s)  | * For Non-Driver ID Holders ONLY   |  |                  |                |             |  |                         |                                    |                              |                    |
| Registration (   | If 62 years old <b>OR</b> a Supplemental Security Income recipient, the fee is \$6.50. |  |                  |                |             |  |                         |                                    |                              |                    |
| ☐ Boat Registra  | If 62 years old <b>AND</b> a Supplemental Security Income recipient, there is no fee.  |  |                  |                |             |  |                         |                                    |                              |                    |
| Snowmobile registrations cannot be processed by mail, you must go to your local DMV office  *If you are a Supplemental Security Income recipient, you must provide processed by mail, you must go to your local DMV office |  |  |                  |                |             |  |                         | st provide proof with thi          | 18 101111.                   |                    |
| PART 3 NEW YORK  | STATE VOTER REG  | SISTRATION AP  | PLICATIO         | N              |             |  |                         |                                    |                              |                    |
|  | n if you want to register to   |  |                  |                |             |  | the Board               | of Elections.                      |                              |                    |
| Are you a citizen of the U.S   | 6.? Will you be 18 years of a<br>Are you at least 16 years                             | •  |                  | -              |             |  | fore electio            | n dau to vote, and th              | at until uou will be eiahtee | en uears           |
| If you answer NO,<br>you cannot register to vote   | of age at the time of such   | election your registro   | ition will be ma | ırked "pen     | ding" and   |  |                         |                                    |                              | No                 |
| Have you voted before? V   | oting information that Yo  | ur name was  | -, 9             |                |             |  |                         | Telepho                            | ne Number (optional)         |                    |
| What Year?   |  | ur address was   |                  |                |             |  |                         | Your sta                           | te or New York State Cour    | nty was:           |
| Political Party  | ou have not voted before.  I wish to enroll in a political par                         | ty:  |                  |                |             |  |                         |                                    |                              |                    |
| You must make 1  | Democratic party   |  | AFFID            | AVIT: I sw     | ear or affi | rm that  |                         |                                    |                              |                    |
| selection. Political party enrollment is optional  |  |  |                  |                |             |  |                         |                                    |                              |                    |
| but that, in order to vote<br>in a primary election of   |  |  |                  | -              | -           | in New York State.                             | gs before the election. |                                    |                              |                    |
| a political party, a voter   | Green party Libertarian party  |  |                  | -              | -           |  | n the line b            | elow.<br>nd that if it is not true | L can be convicted           |                    |
| must enroll in that political party unless   |  |  |                  |                |             | na that if it is not true<br>ip to four years. | , i cuii pe convicted   |                                    |                              |                    |
| state party rules allow otherwise.   | SAM party Other:   |  |                  |                |             |  |                         |                                    | 7                            |                    |
|  | I do not wish to enroll in any po<br>remain an independent voter                       | olitical party and wish to   |                  |                |             |  |                         |                                    |                              |                    |
| I  | No party   |  | Sign <b>X</b>    |                |             |  |                         |                                    | _ Date                       |                    |