

## **Idaho Change of Address Request**

Idaho Transportation Department

ITD 3239 (Rev. 06-12) Supply # 01-955042-5

## This form changes both the driver's license address and the vehicle registration address as needed.

**Driver Services** 

Mail Completed Idaho Transportation Department

Form To: PO Box 7129 Boise ID 83707-1129 <u>Or</u>

- Leave at any county driver's or auto license office

- Fax to: (208) 287-3860

- E-mail to: <a href="mailto:dmvadintctl@itd.idaho.gov">dmvadintctl@itd.idaho.gov</a>
Forms are available at <a href="mailto:dmv.idaho.gov">dmv.idaho.gov</a>

Please Type or Print All Infor	mation						
Full Legal Name				Former Name (If Recently Changed)			
Idaho Driver License/ID Card Number		Daytime Phone Number		Date of Birth			
License Plate Number (1 <sup>st</sup> Vehicle) License Pla		te Number (2 <sup>nd</sup> Vehicle)		License Plate Number (3	B <sup>rd</sup> Vehicle)	License Plate	Number (4 <sup>th</sup> Vehicle)
Pursuant to Sections 49-320, 49- Department be changed to read a physical address.)							
Physical Address			City	City			Zip Code
Mailing Address (If Different Than Physical Address)			City		State	Zip Code	
Date							
Additional Residents Enter additional resident informa Full Legal Name (Printed)	tion for tho	se residents who	are ı	requesting the same a		ange as show	n above.
Idaho Driver License/ID Card Number Daytime Phone Nu			mber	Date of Birth			
License Plate Number (1 <sup>st</sup> Vehicle)	License Pla	te Number (2 <sup>nd</sup> Vehi	cle)	License Plate Number (3	B <sup>rd</sup> Vehicle)	License Plate	Number (4 <sup>th</sup> Vehicle)
Make Changes To: Phy	sical Addı	ress	ling	Address (if different)	)	oth	
Date Signature	Э						
Full and Name (Drinted)				Farmer Name (If Decemb	b : Ob - : 1\		
Full Legal Name (Printed)				Former Name (If Recently Changed)			
Idaho Driver License/ID Card Number Daytime Phone Num ( )					Date of Birtl	h	
License Plate Number (1 <sup>st</sup> Vehicle)	License Pla	te Number (2 <sup>nd</sup> Vehi	cle)	License Plate Number (3	B <sup>rd</sup> Vehicle)	License Plate	Number (4 <sup>th</sup> Vehicle)
Make Changes To: Phy	sical Addı	ess	ling	Address (if different)	)	oth	
Date Signature	۵						