



Iowa Department of Transportation

PARENT'S WRITTEN CONSENT TO ISSUE PRIVILEGE TO DRIVE OR AFFIDAVIT TO OBTAIN DUPLICATE

DL# _____

Audit # _____

Date _____

Clerk _____

Parent's or Guardian's proof of identity when form is used to identify minor.

(Read Reverse Side Before Starting)

THE FOLLOWING INFORMATION TO BE GIVEN UNDER AFFIRMATION

I, _____ hereby request that the Department of Transportation accept the application of my minor son, daughter, ward for the privilege of operating a motor vehicle upon the public highways subject to such restrictions as may be necessary in the issuance of the license. I certify that the following description is true.

Minor's Full Name _____
First Middle Last

DATE OF BIRTH: _____
Month Day Year

Minor Applicant's Usual Signature _____

I, _____ agree, that this affidavit shall be written consent to proceed with the issuance of an:

- Operator Instruction Permit
- Motorized Bicycle License
- Intermediate Driver's License
- Motorcycle Instruction Permit
- Full-Privilege Driver's License
- Motorcycle License
- Minor's Restricted License

I further certify that I, or a co-parent/guardian, have complied with the provisions of Section 321.180B, Code of Iowa, requiring me/us to provide supervised practice drive time prior to issuance as follows:

- INTERMEDIATE DRIVER'S LICENSE: Twenty hours, two hours were between the hours of sunset and sunrise.
- FULL-PRIVILEGE DRIVER'S LICENSE: Ten hours, two hours were between the hours of sunset and sunrise.

I further certify that the minor child named above:

- Does not have any mental or physical disabilities that would affect his/her driving ability.
- Has not had his/her privilege to operate motor vehicles in this state or any other jurisdiction subject to suspension, revocation, disqualification, cancellation, denial, or bar within the past 6 years; or committed an offense or acted in a manner which could result in suspension, revocation, disqualification, cancellation, denial, or bar.

I HEREBY CERTIFY THAT ALL STATEMENTS ON THIS APPLICATION ARE TRUE

Signature _____

Verified and affirmed before me by _____ at _____
County _____ Iowa, this _____ day of _____, _____

Notary Public

*PERJURY IS A CLASS "D" FELONY PUNISHABLE BY UP TO FIVE (5) YEARS IMPRISONMENT AND A FINE OF UP TO \$7,500. IOWA CODE § 720.2, 902.9.

You are required to advise the Office of Driver Services within 30 days of an address change.

ALL INFORMATION SHOULD BE
PRINTED WITH INK OR TYPED

APPLICATION OF UNMARRIED PERSONS UNDER AGE EIGHTEEN

This form must be signed by either parent or meet requirements listed below.

Section 321.184, Code of Iowa, provides that the application of any unmarried person under the age of eighteen years for a motor vehicle license shall contain the verified consent and confirmation of the applicant's birthday by either parent of the applicant. The guardian or other person having custody under 600A The Code, of such minor may consent. Driver License Examiners and Clerks are authorized to administer such oaths without charge.

In the event that this affidavit is to be made out before a Notary Public, it will be necessary that the information be complete, inasmuch as the law does not permit the Examiner to fill in the additional information after the Notary has attached his/her signature. Be sure this affidavit is properly filled out before it is presented to the Driver License personnel.

Licenses issued to parents may be revoked for one year if they give false information in connection with making application for a license for their son, daughter, or ward.

NOTE: The Iowa Code Provides For The Withdrawal Of Consent If The Parent Giving Consent Notifies The Department In Writing.