



# TEXAS DEPARTMENT OF PUBLIC SAFETY DRIVER LICENSE DIVISION

## Guide for First Time DL/ID Applicants





The Driver License Division Guide for First Time DL/ID Applicants is designed as a visual aid to guide you through the Driver License (DL) and Identification (ID) card application process.



Disclaimer: The images in the Guide for First Time DL/ID Applicants are examples of documents that may be required to obtain a DL or ID card.

Note:  
Did you know?

As a first time Texas applicant, you will need to complete form DL-14A, the Application for Texas DL or ID card, before going to the office.

For more information, visit [DL-14A Application for Texas DL or ID card.](#)

**DL-14A - TEXAS DRIVER LICENSE OR IDENTIFICATION CARD APPLICATION  
(ADULT - 17 YEARS 10 MONTHS OF AGE AND OLDER)**

**NOTICE:** All information on this application must be in INK. Applications held for 90 days only.  
**DPS CANNOT REFUND PAYMENT ONCE APPLICATION IS SUBMITTED.**

**FOR DEPARTMENT USE ONLY  
RESTRICTIONS/ENDORSEMENTS  
ASSIGNED #**

Application for:  Driver License  Identification Card Class (select one):  A  B  C  Motorcycle:  Y  N  
Select one:  Original  Renewal  Replacement  Modify  Address or Name Change

**APPLICANT INFORMATION**

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ Middle Name: \_\_\_\_\_  
Suffix: \_\_\_\_\_ Birth Surname (Maiden): \_\_\_\_\_ SSN: \_\_\_\_\_  
Date of Birth (mm/dd/yyyy): \_\_\_\_\_ Sex (select one):  Male  Female Height: \_\_\_\_\_ Ft. \_\_\_\_\_ In. Weight: \_\_\_\_\_ Lbs.  
Eye Color (select one):  Blue  Brown  Gray  Hazel  Green  Black  Maroon  Pink  
Hair Color (select one):  Black  Red  Gray  Brown  Blonde  Bald  White  
Race (select one):  (AI) Alaskan or American Indian  (AP) Asian or Pacific Islander  (BK) Black  (W) White  
Ethnicity (select one):  (H) Hispanic Origin  (O) Not of Hispanic Origin  (U) Unknown  
Place of birth: City: \_\_\_\_\_ State: \_\_\_\_\_ County: \_\_\_\_\_ Country: \_\_\_\_\_  
Father's Last Name: \_\_\_\_\_ Mother's Maiden Name: \_\_\_\_\_

**CONTACT INFORMATION**

Residence Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_  
Primary Phone: \_\_\_\_\_ Cellular Phone\*: \_\_\_\_\_ Email: \_\_\_\_\_

\*Standard data and messaging rates may apply

In the event of injury or death would you like to provide up to two (2) emergency contacts? If yes, please list:

a) Name \_\_\_\_\_ Phone Number \_\_\_\_\_ Address \_\_\_\_\_  
b) Name \_\_\_\_\_ Phone Number \_\_\_\_\_ Address \_\_\_\_\_

Alternate Address: (Authorized Personnel Only)  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

**REQUIRED INFORMATION FROM ALL APPLICANTS**

YES NO

1. \_\_\_\_\_ Are you a citizen of the United States? If no, go to question 3.  
2. \_\_\_\_\_ If you are a U.S. citizen, would you like to register to vote? If registered, would you like to update your voter information?  
I am a resident of the county provided above, and a U.S. citizen; I have not been finally convicted of a felony, or if a felon, I have completed all of my punishment including any term of incarceration, parole, supervision, period of probation, or I have been pardoned; And I have not been determined by a final judgment of a court exercising probate jurisdiction to be totally mentally incapacitated or partially mentally incapacitated without the right to vote.  
By providing my electronic signature, I understand the personal information on my application form and my electronic signature will be used for submitting my voter's registration application to the Texas Secretary of State's office. Wanting to register to vote, I authorize the Department of Public Safety to transfer this information to the Texas Secretary of State.

3. \_\_\_\_\_ Are you a veteran? If no, go to question 4.  
a) Are you a 60% disabled Veteran receiving compensation and want to waive the application fee? (Proof of disability required)  
b) Do you want a Veteran designator on your DL or ID, or  
c) Are you 50% disabled or are you 40% and have had a lower extremity amputated and want a Disabled Veteran designator on your DL or ID? (Proof of heroism or discharge required; acceptable documents are DOD141215, NGB22, VA disability letter, Veteran Identification card, proof of service/verification of honorable service or death. Proof of disability is required for Disabled Veteran designator)  
d) If you want a Veteran or Disabled Veteran designator, do you want the branch of service shown on your DL or ID? If yes, select one:  
Army \_\_\_\_\_ Air Force \_\_\_\_\_ Coast Guard \_\_\_\_\_ Marines \_\_\_\_\_ Navy \_\_\_\_\_

4. \_\_\_\_\_ Do you have a health condition that may impede communication with a peace officer? Physician must complete form DL-101.  
5. \_\_\_\_\_ Would you like to register as an organ donor? Yes = Add/Keep my name on the Donate Life Texas Registry (Add/Keep Hero's Heart Symbol)  
No = Does not add your name to the Registry and does not remove your name if already registered\*

\*By selecting no, you must remove your name from the Donate Life Texas registry. By doing so, you will have the option to remove your name from the registry. Enter your information to gain access to your registration. Do you want to support the Glenda Dawson Donate Life Texas donor registry? If yes, please indicate a donation amount of \$1 or more \$\_\_\_\_\_00.

6. \_\_\_\_\_ Do you want to donate \$1.00 to the Blindness Education Screening and Treatment Program?  
7. \_\_\_\_\_ Do you want to support the Glenda Dawson Donate Life Texas donor registry? If yes, please indicate a donation amount of \$1 or more \$\_\_\_\_\_00.  
8. \_\_\_\_\_ Do you want to support Texas Veterans? If yes, please indicate a donation amount of \$1 or more \$\_\_\_\_\_00.  
9. \_\_\_\_\_ Do you want to support survivors of sexual assault? If yes, please indicate a donation amount of \$1 or more \$\_\_\_\_\_00 to help fund the testing of sexual assault evidence collection kits (rape kits).  
10. \_\_\_\_\_ Do you want to support the issuance of a DL/ID for foster or homeless youth? If yes, please indicate a donation amount of \$1 or more \$\_\_\_\_\_00 to exempt this population from paying any fees.

DL-14A (Rev. 12/2023) APPLICATION CONTINUED ON BACK

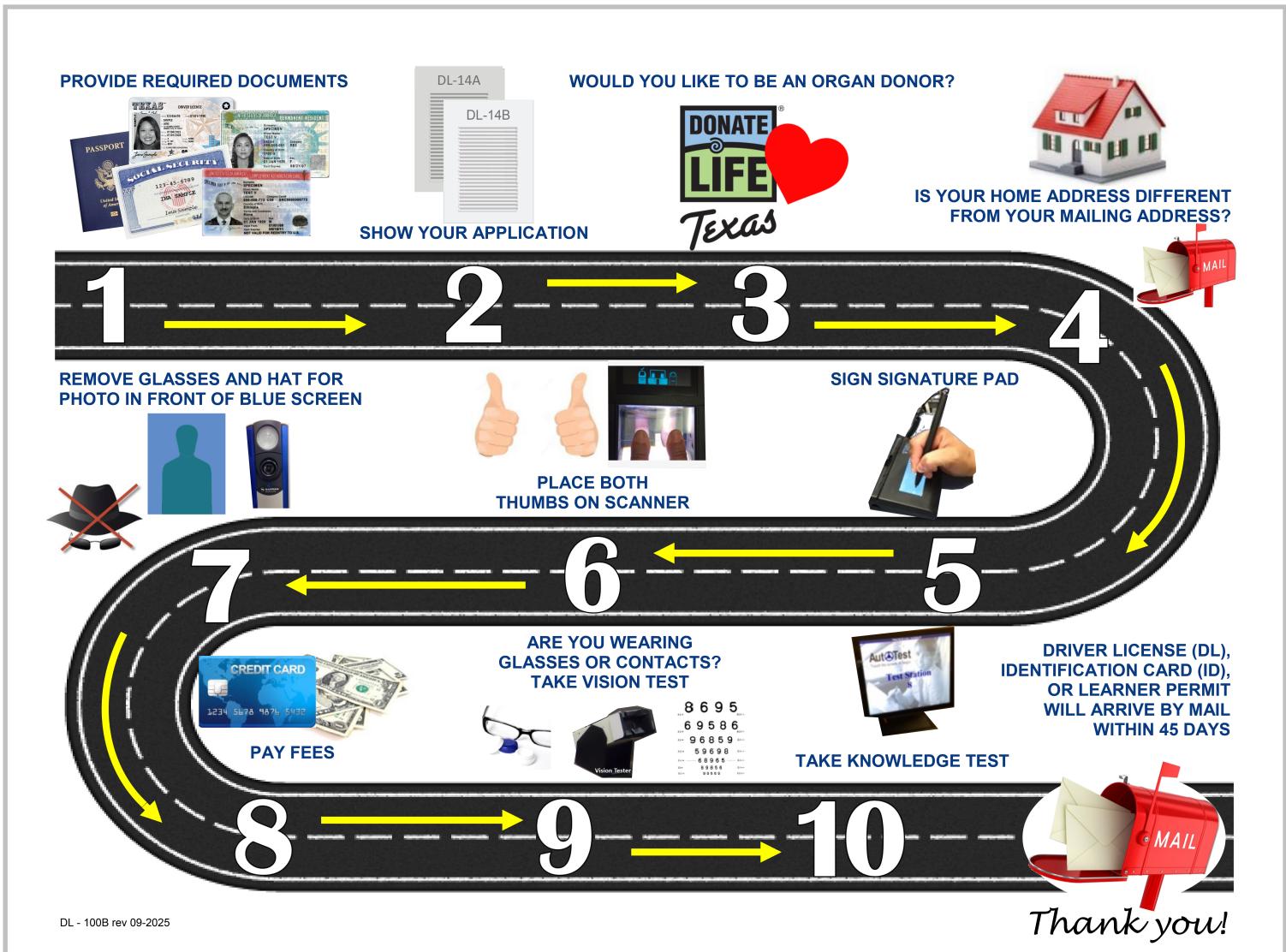
**Documents**





## Steps

These are the basic steps in the DL and ID card first time application process.



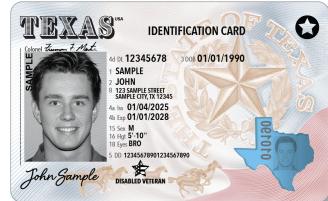


## Step 1

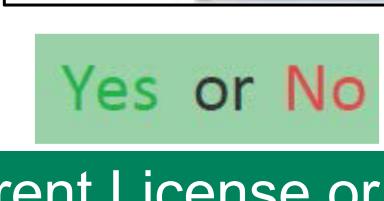
Do you have one of these documents to prove identity? If not, then go to the next page.

For a complete list of acceptable documents, visit [How to apply for a Texas Driver License](#).

Do you have a Texas Driver License or ID card?



Do you have a current Driver License or ID card from another state?



Do you have a current Driver License from another country?



Yes or No

Current License or ID card



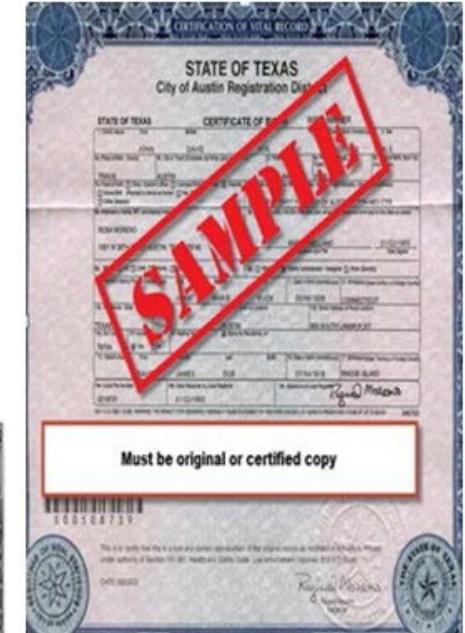
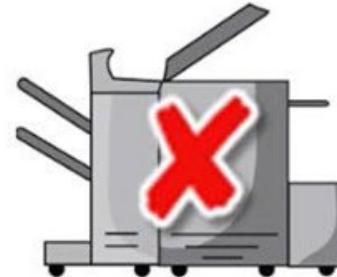


## Step 1 --

*Skip this page if you already have an identity document on the prior page.*

Do you have an original or certified copy of one of these documents? If not, then go to the next page.

*For a complete list of acceptable documents, visit [Identification Requirements](#).*



Originals or certified copies only



## Step 1 --

*Skip this page if you already have an identity document on the prior page.*

Do you have an original of one of these documents? If not, then go to the next page.

*For a complete list of acceptable documents, visit [How to apply for a Texas Driver License](#).*



Naturalization Certificate



Certificate of Citizenship with picture

Must be originals, not copies



## Identity Documents

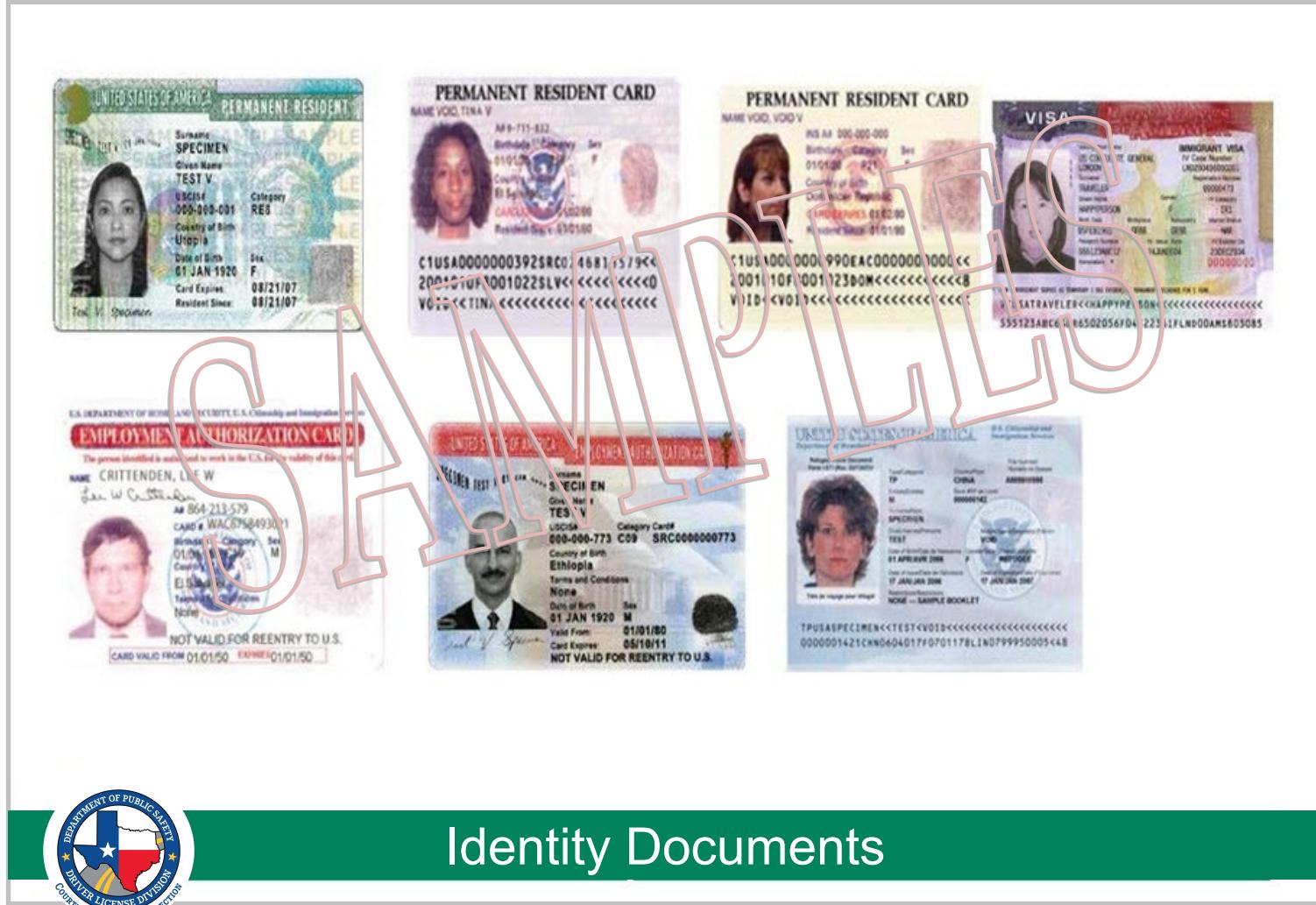


## Step 1

*Skip this page if you already have an identity document on the prior page.*

Do you have an original of one of these documents? If not, then visit the link below.

*For a complete list of acceptable documents, visit [How to apply for a Texas Driver License](#).*



## Identity Documents



## Step 1 --

Do you have  
two documents  
for proof of  
residency in  
Texas with your  
name on it.  
The next three  
pages provide  
examples.

For a complete list of acceptable documents, visit [Texas Residency Requirement for Driver Licenses and ID Cards.](#)

Electric Company						
P.O. Box 123, Anytown, USA						
Account Number	Account Name		Rate	Cycle	Service Address	
1234560	Jones, Bob		5	7/08	123 Main Street	
Service Period From To	No. Days	Bill Type	Meter Reading Previous / Present	Multiplier	KWh Usage	Amount
08/18 09/11	29	0	06434 08114	1		10.00
<b>Base Charge</b>						10.00
Energy Charge					1680	154.47
Fuel Cost Adjustment: \$(0.005)						8.40
Sale Tax - State						5.78
Sale Tax - Special						1.44
Total Amount Due						160.09

### Electric bill with name and address

OE (STATE)	INSURANCE IDENTIFICATION CARD		
COMPANY NUMBER	COMPANY Travelers		
POLICY NUMBER GLC102345 111		EFFECTIVE DATE 05/01/2015	EXPIRATION DATE 11/01/2016
YEAR 2016		VEHICLE IDENTIFICATION NUMBER 1X134568412345590	
MANUFACTURER FIAT RAM 1500			
AGENCY/COMPANY ISSUING CARD Anderson-Campbell Insurance Agency, Inc. P.O. Box 308			
Toronto INSURED		OE 43964-	(740) 537-2424
Joe Consumer 123 Lettuce Dr		OE 43964-	
SEE IMPORTANT NOTICE ON REVERSE SIDE			

#### Medical card with name and address



# Texas Residency

Residential Lease with applicants  
name & address listed

Utility bills and other documents must contain applicant's name and residential address.



## Step 1 --

# Texas Residency document examples continued.

For a complete list of acceptable documents, visit [Texas Residency Requirement for Driver Licenses and ID Cards](#).

### Monthly Bank Statement

24 HOUR TELEPHONE TRANSFER LINE - 123-9478  
CUSTOMER SERVICE NUMBER - 847-1234 EXT 294

**Note: No name or address, this document is not acceptable**

\*\*\*\*\*  
DEPOSIT ACCOUNTS  
DETAILED CHECKING  
REGULAR CHECKING  
ACCOUNT  
SOC. SEC

THIS STATEMENT SHOWS ALL ACCOUNT TRANSACTIONS FROM SEP 14, 1997 - THRU OCT 12, 1997

DEPOSITS		CHECKS AND DEDUCTIONS				DAILY BALANCES	
DATE	AMOUNT	NO	DATE	AMOUNT	NO	DATE	AMOUNT
9/19	100.00	4882	9/15	32.00		9/15	2533.40
	****	****				9/16	2503.45
	269.00	4885	9/15	29.95	4886	9/19	2693.45
		4886	9/25	10.00		9/26	2593.45
		4888	10/02	40.00		9/28	2662.45
						10/02	2522.45

\*\*\*\* INDICATES ONE OR MORE MISSING CHECKS

BEGINNING BALANCE 9/14/97		DEPOSITS & CREDITS		CHECKS & DEBITS		ENDING BALANCE 10/12/97	
NO	AMOUNT	NO	AMOUNT	NO	AMOUNT	NO	AMOUNT
	2565.40	2	369.00	4	111.95		2822.45

ENCLOSURES: 8

Source Power & Gas LLC  
2150 Town Square Place, Suite 380  
Sugar Land, TX 77479

CUSTOMER SERVICE: (888) 557-0065  
Mon - Fri 8:00 AM - 5:00 PM CT  
TXCustomerCare@sourceenergy.com  
Outage Reporting: (900) 332-7143

**SOURCE**  
POWER & GAS

Customer: Joe B. Customer  
Billing Account # **12345678-901-2**  
INVOICE #: 12345678

**No name or address, not acceptable**

Summary as of Feb 07, 2013  
(account details start on next page)

Previous Statement Amount:	\$70.27
Total Payments Received:	(\$70.27)
Balance Forward:	\$0.00
Current Charges:	\$73.79
Amount Due Feb 25, 2013:	\$73.79



## Texas Residency

**bounce energy**  
PUC No. 10162  
P.O. Box 4423, MSC #200 Houston, TX 77210

**amount due:** \$12.61    **payment due date:** 5/23/2014    **amount due after due date:** \$13.24    **account number:** 00000000

**John Valued Customer**  
12345 Main St #1234  
Houston, TX 77040  
ESU# 0000000000000000  
Meter Number: 0000000000000000  
Meter Multiplier: 1

**HOW TO PAY YOUR BILL:**  
Pay Online: <http://www.bounceenergy.com/myaccount>  
Pay By Mail: P.O. Box 4423, MSC #200 Houston, TX 77210  
Pay By Phone: 1-888-45-BOUNCE (1-888-452-6862)  
Pay In Person: Ace Cash Express or MoneyGram

**Support the Earth! We're donating \$0.50 for each new like on Facebook to The Conservation Fund this Earth Month. benergyforcharity**

**Monthly Summary**  
Bill Date: 05/01/2014    Bill Period: 04/01/2014 - 05/01/2014

Previous Balance:	\$92.20
Payments Made/Credits:	\$92.20
Current Monthly Charges:	\$12.61
<b>Total Amount Due:</b>	<b>\$12.61</b>
Amount Due After Due Date:	\$13.24

**KEEP EARNING REWARDS & RENEW TODAY!**  
Switch to our fixed plan has no expiration! Make sure to visit [www.bounceenergy.com/renew](http://www.bounceenergy.com/renew) to renew to another low fixed plan. If you take no action, your electricity service will continue under our variable month-to-month plan on your next billing statement with Bounce Energy.

Lower your Bounce electricity bill! Refer your friends today & easily earn \$50!

For more information about residential electric service please visit [www.powerchoose.com](http://www.powerchoose.com)

**Customer Service Information:**  
Hours: 8:00 AM - 5:00 PM - Spn, Sat, Sun - Spn;  
Email: [EmailCustomerCare@bounceenergy.com](mailto:EmailCustomerCare@bounceenergy.com); Phone Number: 1-888-452-6862  
Web Site: <http://www.bounceenergy.com>

**Power Outage Information:**  
To report power outages or concerns about the safety of the electric system 24 hours a day, 7 days a week, please contact Convergent Energy (800) 332-7143.

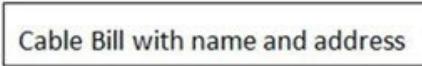
Utility bills and other documents must contain applicant's name and residential address



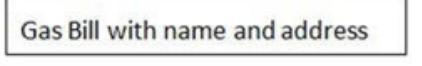
## Step 1 --

Texas Residency document examples continued. If you don't have one of these documents, visit the link below.

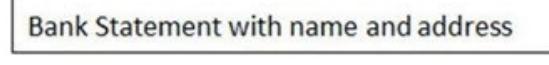
For a complete list of acceptable documents, visit [Texas Residency Requirement for Driver Licenses and ID Cards](#).



**Cable Bill with name and address**



**Gas Bill with name and address**



**Bank Statement with name and address**



**Texas Residency**



## Step 1 --

*continued*

Your two Texas residency documents with your name on each, must be dated over 30 days old but less than 180 days old.

For a complete list of acceptable documents, visit [Texas Residency Requirement for DLs and ID cards](#).

**> 30 days**

SUN	MON	TUE	WED	THU	FRI	SAT
				1		
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

**< 180 days**

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2	3	4
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29					

SUN	MON	TUE	WED	THU	FRI	SAT
			1	2		
3	4		7	8	9	
10	11		14	15	16	
17	18		21	22	23	
24	25		28	29	30	

Must be dated greater than > 30 days

But less than < 180 days old



## Residency documents timeline



## Step 1

Do you have your Social Security Number (SSN)? If not, you will complete an affidavit at the driver license office.

Do you have a Social Security number?



Social Security Affidavit

SOCIAL SECURITY AFFIDAVIT  
Texas Department of Public Safety

06-13 (10/18)

NAME: \_\_\_\_\_ (LAST) \_\_\_\_\_ (FIRST) \_\_\_\_\_ (MIDDLE/MONTH) \_\_\_\_\_ DOB: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

As a condition for the issuance of a Texas identification card/driver license, I hereby certify that I have never applied for, been issued or assigned a Social Security Number by the Social Security Administration; or have applied for and been denied the issuance of a social security number due to my ineligibility. Further, I do hereby authorize a review of and full disclosure of all records concerning the issuance or use of a Social Security Number to any duly authorized agent of the Texas Department of Public Safety, whether the said records are of a public, private or confidential nature. This information will be used to determine my eligibility to receive a Texas identification card or driver license based on the requirement to provide a Social Security Number.

NOTICE: I understand that failure to provide required information during the application process is cause for cancellation of my Texas identification card or driver license and/or driving privilege pursuant to Texas Transportation Code §21.315 and subjects me to other criminal penalties including Texas Transportation Code, Section 521.451 and Section 521.454.

I hereby certify, under penalty of perjury that the above information is true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Subscribed and affirmed, or sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, in the county of \_\_\_\_\_, State of Texas.

Signature, Authorized Agent of Texas Department of Public Safety, ID #, Station #

Yes or No

Social Security Number





## ---Step 1---

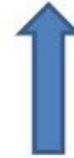
Are you a teen applying for a Texas DL or ID for the first time? If yes, your parent or legal guardian must come with you.

For more information on parent or legal guardian requirements, visit [How to apply for a Texas Driver License as a Teen](#).



Parents

Are your parents or a legal guardian here with you?



Legal Guardian



Parent or legal guardian



## Step 1

Do you own a vehicle? If so, you are required to show proof of Texas registration and insurance, in your name.

For more information, visit [Texas Department of Motor Vehicles](http://www.txdmv.gov).



Do you own a vehicle?  
Is it in your name?



Is the vehicle registered in your name?

Yes or No

Do you have vehicle insurance in your name?



Vehicle registration and insurance

YOUR POLICY INFORMATION			
INSURANCE COMPANY	AGENCY/COMPANY		
Esurance Insurance Company	Esurance Insurance Services, Inc.		
650 Davis Street	P. O. Box 5250		
San Francisco, CA 94111	Sioux Falls, SD 57117-5250		
NAIC# 25712			
POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	
PACA-003637001	April 22, 2010	October 22, 2010	
YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER	
2005	Honda/ACCORD EX	1HGCM66545A04573	
1985	Mercedes Benz/380SL	WDBBA45C0FA024523	
INSURED NAME AND ADDRESS		ADDITIONAL LISTED DRIVER(S)	



## --- Step 1 ---

If you are under 25 years of age, you must provide proof of Driver Education and school enrollment.

For more information, visit [Texas Department of Licensing & Regulation \(TDLR\)](http://www.tdlr.state.tx.us/DriverEd/) Driver Education & Driving Safety.

Driver Education Certificate	
DPS COPY	<b>TEXAS DRIVER EDUCATION CERTIFICATE</b> <small>(Type or print legibly in black ink)</small> <b>FOR DRIVER LICENSE ONLY</b>
CONTROL NO. <span style="float: right;">[Redacted]</span>	
<input type="checkbox"/> Driver Education School <input type="checkbox"/> TDLR Parent Taught Course <input type="checkbox"/> Duplicate (Original Control # <span style="float: right;">[Redacted]</span> ) <input type="checkbox"/> Transfer (See Back for Details)	
<input type="checkbox"/> 7 hours behind-the-wheel instruction <input type="checkbox"/> hrs simulator instruction (min. 4 hrs) <input type="checkbox"/> hrs multi-car driving range (max. 2 hrs) and 7 hours in-car observation <input type="checkbox"/> hrs behind-the-wheel instruction (max. 4 hrs) and 7 hours in-car observation	
Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female Last _____ First _____ MI _____	
Permit #: _____ Classroom Completion: _____ Laboratory (in-car) Completion: _____	
<i>I hereby certify that the person indicated has completed and passed both the classroom and the laboratory phase of a driver education course approved by the Texas Department of Licensing and Regulation.</i>	
Signature of Licensed Driver Educator or TDLR PT Instructor    TDLR Number or TDLR PT Instructor ID Number    Name of School or TDLR PT Course	
Signature or Signature Stamp of Chief School Officer in TDLR PT CP, Driver Education School or TDLR PT Course #    Date Issued	
<input type="checkbox"/> 30 hours behind-the-wheel instruction, including at least 10 hours of instruction that took place at night <i>I hereby certify that the person indicated has completed the additional behind-the-wheel instruction in the presence of an adult who meets the requirements of Section 521.222(d)(2), Transportation Code.</i>	
Signature of Instructor    Driver License Number    Date	
<small>WARNING: You may convert a course if you give this driver education certificate to the Department of Public Safety or to an insurance company and you did not complete the course of hours as indicated. You may also convert a course if you put any information on this certificate that is not true.</small>	
<b>UNLAWFUL IF REPRODUCED OR ALTERED - INVALID IF STATE SEAL IS NOT VISIBLE</b>	
[Redacted]	
TEXAS ADULT DRIVER EDUCATION CERTIFICATE	
DPS COPY	<b>DRIVER EDUCATION COURSE EXCLUSIVELY FOR ADULTS</b> <b>CONTROL NO. <span style="float: right;">ADE 000000</span></b>
<input type="checkbox"/> Driver Education School <input type="checkbox"/> Parochial / Private School <input type="checkbox"/> Public School <input type="checkbox"/> Duplicate (Original Control # <span style="float: right;">[Redacted]</span> ) <input type="checkbox"/> 6-Hour Online Course    Completion: _____	
<input type="checkbox"/> Student has taken and passed the Class C-Road Rule and Class C-Road Signs Examination	
<input type="checkbox"/> Student must take vision examination at the Department of Public Safety.	
Name: _____ Date of Birth: _____ <input type="checkbox"/> Male <input type="checkbox"/> Female Last _____ First _____ MI _____	
<i>I hereby certify that the person indicated has completed and passed a 6-hour driver education course exclusively for adults approved by TDLR.</i>	
Signature of Licensed Driver Education Instructor    TEA Number    Name of School	
Signature or Signature Stamp of Chief School Officer    Driver Education School Number    Date Issued	
<b>CUSTOMER SERVICE PHONE NUMBER:</b> _____	
<small>WARNING: You may convert a course if you give this driver education certificate to the Department of Public Safety and you did not complete the course or if you put any information on this certificate that is not true. If you have reason to believe that the course requirements are not being met by this driving school, contact TDLR, 10-800-252-5134 - Austin, TX 78718 or 1-800-252-5444.</small>	
<b>UNLAWFUL IF REPRODUCED OR ALTERED - INVALID IF VIRTUAL DRIVE SEAL IS NOT VISIBLE</b>	



# Driver Education

*Note:  
Drive Test  
Applicants*

You will be required to provide your Impact Texas Drivers (ITD) certificate of completion before you take the drive test.

### Impact Texas Teen Drivers



### Impact Texas Adult Drivers



## Impact Texas Driver Program

DL-100A

For more information, visit [Impact Texas Drivers \(ITD\)](#).

*Note:  
Communication  
Barriers*

If you have a communication barrier, you may be required to bring a physician's statement to the Driver License office.



**PHYSICIAN'S STATEMENT**  
(Please type or print)

Texas Transportation Code §521.125 allows the Texas Department of Public Safety to include on an individual's driver license or identification card any health condition that may impede the individual's communication with a peace officer.\* The health condition must be evidenced by this signed statement from a licensed physician. By providing this information, the phrase "communication impediment" will be printed on the reverse side of the driver license or identification card.

**PHYSICIAN'S STATEMENT**  
(Please type or print)

Texas Transportation Code §521.125 allows the Texas Department of Public Safety to include on an individual's driver license or identification card any health condition that may impede the individual's communication with a peace officer.\* The health condition must be evidenced by this signed statement from a licensed physician. By providing this information, the phrase "communication impediment" will be printed on the reverse side of the driver license or identification card.

Patient's Full Name: \_\_\_\_\_

Patient's Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Patient's DL/ID#: \_\_\_\_\_

Physician: \_\_\_\_\_

Physician's Address: \_\_\_\_\_

Physician's Office Telephone No.: \_\_\_\_\_

Medical License No.: \_\_\_\_\_ State: \_\_\_\_\_

Health Condition: \_\_\_\_\_

Patient's Signature: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Physician's Signature: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\* This form is a confidential driver record per Chapter 720 of the Texas Transportation Code.

NOTE: All other health conditions may be noted by the customer on the reverse side of the DL or ID by marking the directive to physician and entering the phone number for the physician.

DL-101 (7/14)

DL form 101



## Communication issues with a Peace Officer

For more information, visit [Communication Impediment with a Peace Officer.](#)



## Step 2

You will submit your DL-14A application, and swear or affirm the information you provide is true and correct.

For more information, visit [DL-14A Application for Texas DL or ID card.](#)



I do solemnly swear, affirm, or certify that I am the person named herein and that the statements on this application are true and correct.



Swear or affirm to correctness of information



## Step 2

*continued*

You will be asked to provide two emergency contacts on your DL-14A application.

*For more information, visit [DL-14A Application for Texas DL or ID card.](#)*

9.   In the event of injury or death would you like to provide two (2) emergency contacts? If yes, please list:  
a) Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Address \_\_\_\_\_  
b) Name \_\_\_\_\_ Telephone Number \_\_\_\_\_ Address \_\_\_\_\_

Do you have a person who should be contacted in case of an emergency?



### Emergency Contact Information

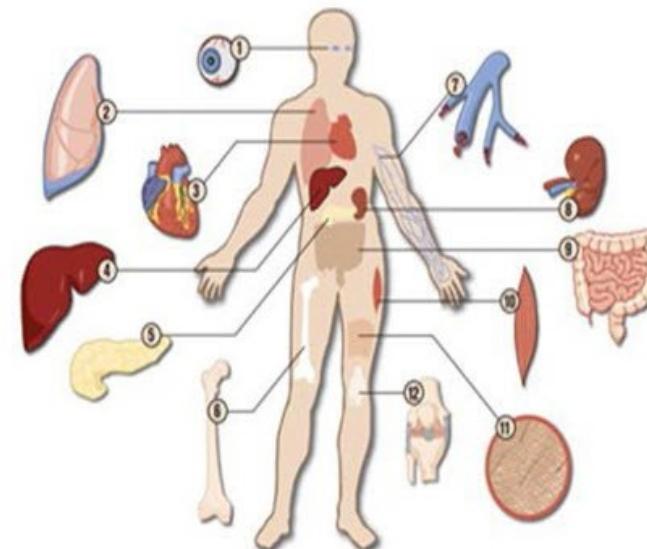


## Step 3

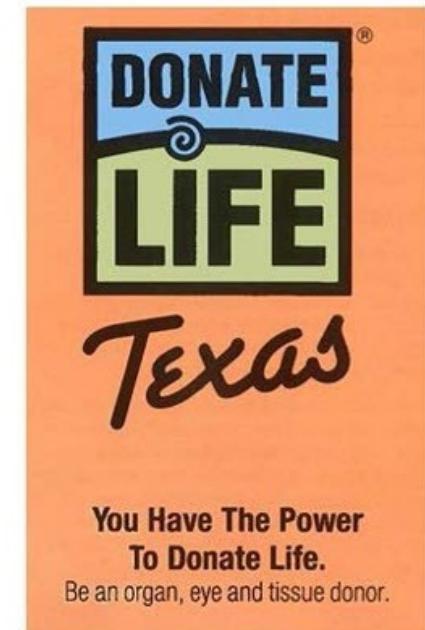
You will be asked if you want to join the Organ Donor Registry. If yes, your card will be printed with a Hero's Heart symbol as a reminder of your choice to save lives.

For more information, visit [Donate Life Texas](#).

Would you like to be an organ donor?



## Organ Donation





## --- Step 4 ---

You will be asked to provide your home address to be listed on your DL or ID card, and an address your card will be mailed to, if different.

Home



123 Main Street  
Austin, TX 78749

Is it a house or an apartment?



Mailing



123 Main Street  
Austin, TX 78749



What is the apartment number?  
APT# \_\_\_\_\_

Home and mailing address



## Step 5

You will be asked to provide your signature for your DL or ID card.

Sign your name electronically.



*John Smith*



Select the “OK” button after signing your name.

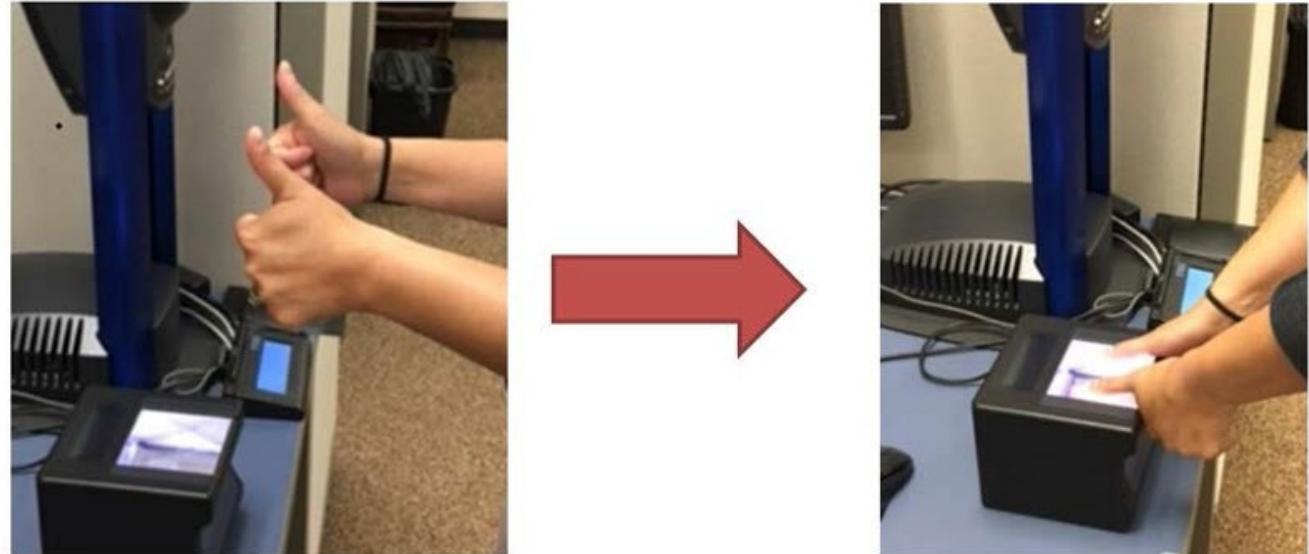


Signature



## ---Step 6---

You will be asked to provide your thumbprints for your DL or ID card.



Place both thumbs on the lighted scanner. Hold them there until the employee says finished.

## Fingerprints





## ---Step 7---

Your photo will be taken for your DL or ID card.

Stand in front of the blue screen



Remove hats and glasses



Smile and look at the blue dot. Your picture will be taken.

Photograph / Picture





## Step 8

Driver License offices accept the following forms of payment:  
credit card;  
check; money order, and  
\*cash.

*\*Cash is not accepted in the Big Lake Driver License office.*

Credit Card



Check



Money Order



Cash



## Payment





## Step 8 --

*continued*

These are the basic fees for a Texas DL and ID card.

*For a complete list of DL, ID and CDL fees, visit [Driver License Division Fees](#).*



### New Driver License (Class A, B, or C or Learner)

Age	Fee
Under 18	\$16
18 to 84	\$33
85 and older	\$9

### Renew License (Class A, B, or C)

Age	Fee
Under 18	N/A
18 to 84	\$33
85 and older	\$9

### Replace\* License (Class A, B, or C)

Age	Fee
All Ages	\$11

\*Replace a lost, stolen, or damaged license, Change address or name, or Test to add or remove restrictions

### Other Cases

Disabled veterans (60%): new or renewal Free (with approved documentation)

Limited term driver license for temporary visitors to the US: \$25

## Fees

### New Identification (ID) Card

Age	Fee
Under 59	\$16
60 and older	\$6

### Renew Identification (ID) Card

Age	Fee
Under 59	\$16
59 and older	\$6

### Replace\* Identification (ID) Card

Age	Fee
All Ages	\$11

\*Replace a lost, stolen, or damaged ID card or Change address or name

8 6 9 5  
6 9 5 8 6  
9 6 8 5 9  
5 9 6 9 8  
6 8 9 6 5  
8 9 8 5 6  
9 8 6 9 2

## Step 9

Vision test requirements are for DL applicants only.

Do you wear glasses or contacts?

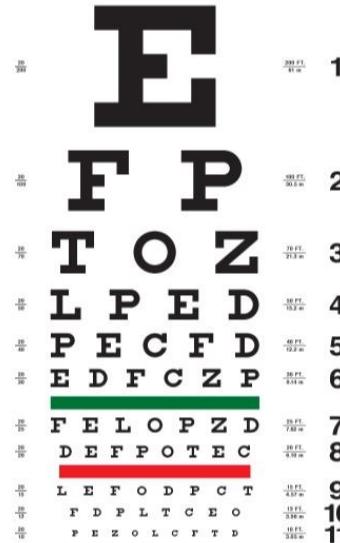
Yes or No



Say the colors on Line -

A              
B              
C           

If instructed, write your answers



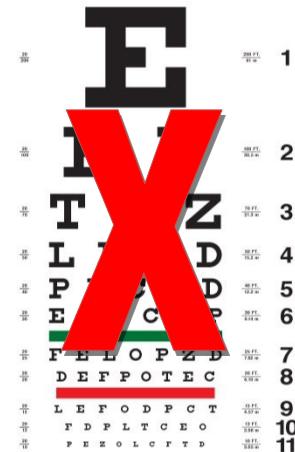
## Vision Test

8 6 9 5  
6 9 5 8 6  
9 6 8 5 9  
5 9 6 9 8  
6 8 9 6 5  
8 9 8 5 6  
9 8 6 6 2

## Step 9 --

*continued*

You may be required to get an eye exam from a physician, if you do not pass the vision test at a Driver License office.



Take this form to your eye doctor to complete and then return to the Driver License office to complete your processing.



### INSTRUCTIONS TO APPLICANT

The simple vision test on the drivers license examination shows that you would probably be a safer driver if you could see better. You are being asked to have your eyes examined by an eye specialist to determine whether your sight can be improved by glasses or treatment. If glasses will make you a safer driver, your license will permit you to drive only while wearing them.

In some cases examination by more than one specialist may be requested.

If you have any questions about how well you must be able to see to be granted the privilege of driving on the streets and highways of Texas, the examining officer will be glad to answer them.



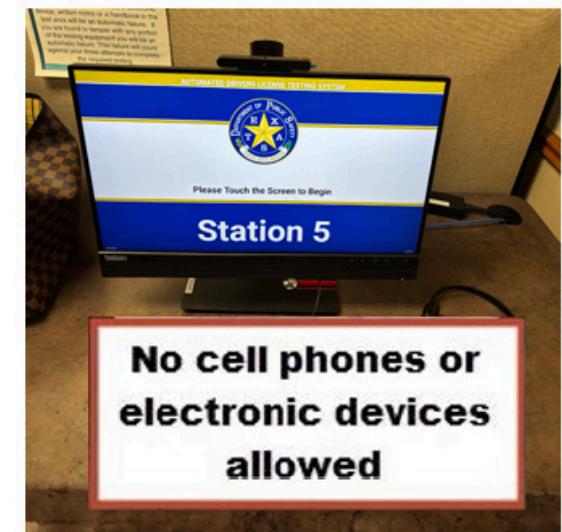
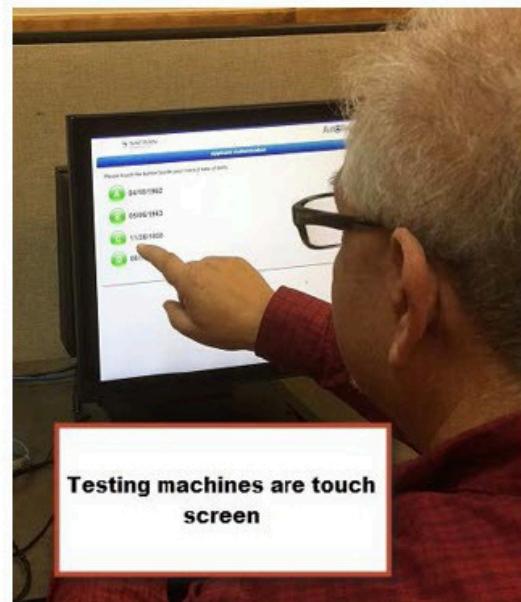
## Vision Test - Did not pass



## -- Step 10 --

The computer or written test is required for new DL applicants, and DLs that are expired more than two years.

*This does not include some transfers of valid out of state licenses, or applicants tested by a registered third party tester.*



When you are finished with your test, return to the designated area.

If you have computer problems while testing, get help from \_\_\_\_\_.



## Knowledge Test



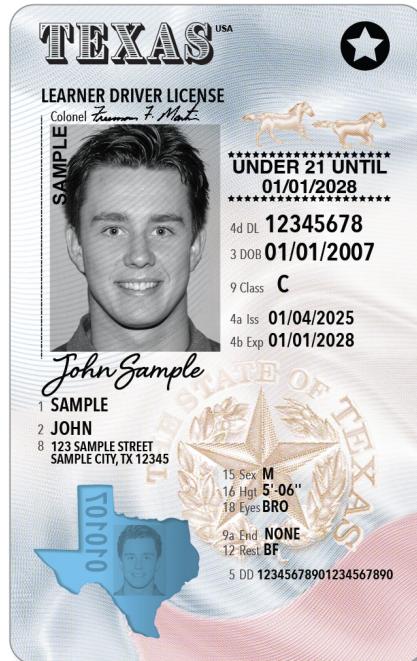
## -- Step 10 --

*continued*

As part of the vision, written and skills testing, a restriction may be added.

These are a few of the common DL restrictions.

*For a complete list of DL restrictions, visit [Driver License Endorsements and Restrictions](#).*



A – Drive with corrective lenses

B – Must have a licensed operator over age 21 with at least one year of driving experience in the front seat while driving

F – Must hold a valid learner license until MM/DD/YY

G – Must not operate a motor vehicle between midnight and 5:00am unless driving to/from work or school-related activity, or due to a medical emergency.

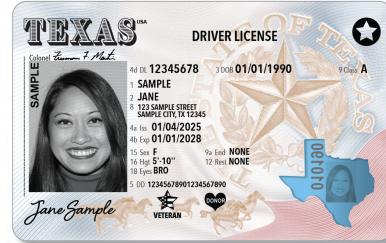
Must not have more than one passenger under the age of 21 who is not a family member

S - Outside rearview mirror or hearing aid

## Restrictions

Note:  
Did you know?

You will receive  
your card by  
mail, within 45  
days.



License or ID will be mailed within 45 days



Temporary Permit is good for 45 days



Driver license / ID card mailed

*Note:  
RESOURCES*

For more information on the DL or ID card application process, visit these resources.

- What to Bring With You for a [DL or ID card](#)
- What it Takes to Apply for a DL or ID card [brochure](#)
- Texas Driver [Handbook](#)
- Search for a [Driver License office](#)
- [Schedule an Appointment](#)
- Texas Driver License [homepage](#)
- Customer Service Center [FAQ's](#)



## Resources