

GUAM DRIVER'S LICENSE AND GUAM ID TEMPORARY ON-ISLAND MAIL-IN APPLICATION



FOR NON-REAL ID ONLY v2022.11.23

APPLICATION INSTRUCTIONS: Please read and complete all necessary fields. Read the instructions page thoroughly to ensure you have the proper

documents.	
IMPORTANT	NOTICE:

1. Guam ID renewals and replacements for the mail-in option is to be utilized by US Citizens only.

2. All copies of identification provided must be CLEAR and legible.

3. VETERAN: To claim VETERAN status, submit one (1) of the following documents: Certification of Veteran Status issued by the Guam Veterans Affairs Office, DD-214 Form (must be honorably discharged), DD-2 Form, DD-1173 Form, DD-2765 Form, Common Access Card (CAC), or Veteran Card (card must have VA#, issue and expiration date). Waiver of Motor Vehicle DL fees for Veterans and extended beneficiaries must meet requirements stated under Title 16, Chapter 3 Section 3102.1, Guam Code Annotated.

SERVICE: GUAM DL						CITIZENS ONLY)	
[] Renew Guam [0L (3yr)-\$28	[]	New Intermediate DL -\$13		[] Renew G	Juam ID- \$28	
			(Traffic clearance required)				
[] Renew Guam [) (5,(r) ¢10	r 1	Convert Intermediate to Full	LDI ¢12	I I Doplage (Guam ID- \$28	
[] Renew Guam [л (руг)-ф4о	[]	(Traffic clearance required)	IDL -913	[] Replace (Juani ID- 920	
			(
[] Replace Guam	DL -\$28						
PART 1 - PERSONA	. INFORMAT	ION		APPLICATION DAT	E:		
Name: First			Middle	Last			
Home Phone:			Cell Phone:	E-1	Mail:		
Residential Address:				Mailing Address: [] Same	as Residential Add	dress	
		1					
Citizenship Status:		Birth Country: [] USA		Birth State:	Country of Citizenship: [] USA		
[]USA []NON-US		[] OTHER:				[]:OTHER:	
] FEMALE	Hair Co		Eye Color:	Date of B	irth:	
Height: FT	IN	Weight:		Social Security Number:			
Organ Donor: [] YES			ment Status: [] Unemploy		d (Federal/Local) [] Student	
If minor, parent conse		Employ		Occupation:	Work No:		
				dent of Guam who is a deaf,	nearing impaired o		
may apply to have the			NE, if applicable) VETERAI	Numberton []VEC []	Military Dranaby]YES []NO []N/A	
NO	(OP HONAL.	Select U			Military Branch:		
Active Duty	Veter	an	Shouse/Legal Guardian/S	urviving Spouse qualified und	1or P 33_06	Gold Star Recipient	
Military	Veler	an	opuuse/Legal Oualulai/J	ai viving opouse quaimed and			
PART 2 – DRIVING I	FORMATIO	N					
			uestions listed below. ple	ase select "YES" or "NO"			
			our hands and feet? If NO,				
			ins and signals? If NO, Exp				
				? If YES, give date, place an	d explain:		
				icab or motorcycle license? I		ace and explain:	
			• •	-		·	
Have you ever been afflicted with epilepsy, insanity, paralysis, heart condition, diabetes, or other disability which might affect your							
	driving control? If YES, Explain: Are you a habitual drunkard or addicted to narcotic drugs or a habitual user of any other type(s) of drug(s)? If YES, Explain:						
	Have you ever been convicted of or pled guilty of any traffic violation within the last 5 years? If YES, give date, place and list						
violation(s): SELECTIVE SERVICE: FOR MALE APPLICANTS BETWEEN THE AGES OF 16 - 25.: In compliance with P.L. No. 27-82 as it pertains to the							
U.S. Selective Service System, the following is asked of every male applicant. If applicable, select ONE option below.							
I consent to register with the Selective Service System as required by Federal Law within 30 days of my 18th birthday.							
I decline to register with the Selective Service System as required by Federal Law. I understand that failure to register is a federal crime punishable by up to 5 years imprisonment and a \$250,000 fine.							
MOTOR VOTER: Eligibility to Register to Vote in Guam: By consenting to register to vote or update my registration, I attest that I am a U.S. Citizen, who is at least sixteen							
(16) years of age, who is a resident of Guam defined in 9 GCA § 9123, who is not confined to a mental institution nor judicially declared insane, and who is not committed under a							
sentence of imprisonment. SELECT ONE: [] consent to register to vote. [] decline to register. [] am currently registered to vote and would like to update by registration.							
I was registered under the Full Name: County & State of Previous Registration (<i>if currently registered in another US Jurisdiction</i>): 3 GCA § 3102(a)(3)(J) Unlawful Registration is a Crime. A person who willfully causes, procures or allows himself or herself or any person to be registered as a voter, knowing himself							
				degree. APPLICANT SIGNATURE		······································	
PART 3 - DISCLAIM	R						
I declare under penalt	y of perjury,	that all in	formation contained in this	application and any accomp	anying document is	true and correct, with full	
knowledge that all sta	tements made	e in this a		vestigation and that any false			
APPLICANT SIGNATURE: DATE:							
FOR MINOR APPLICANTS:							
A PARENT or LEGAL GUARDIAN must complete the following in the case of a Minor applicant:							
	-		``			· •	

Guardian(circle one) of the Permittee applicant, who is a minor, and that all information provided herein is true and correct to the best of my knowledge. I also hereby grant my consent to the Driver's License Examination Branch to administer any and all actions as allowed by law, to facilitate the issuance of a Driver's License or Guam ID to my minor child named above.

Signature: PARENT or LEGAL GUARDIAN (required if applicant is a minor)

DATE

SIGNATURE SPECIMEN SIGNED IN BLACK INK ONLY.

NOTE: To ensure better imaging results, please write your signature away from the arrow. See sample below.

SAMPLE:				
Please sign here John Doe Samp	ele			
	*This will be the signature used on your ID card.			
Please sign here				
I declare under penalty of perjury that the foregoing is true and correct and that I am the same person described on this application.				
Signature	Date:			

Subscribed and sworn to before me on this day _____ of ______ Notary Public ______