



APPLICATION FOR MODIFICATIONS TO A TRAFFIC VIOLATOR SCHOOL OPERATOR AND INSTRUCTOR LICENSE

DMV USE ONLY	
OPER/INST NUMBER	DATE APPL RECEIVED
TOTAL FEE	DATE PERMIT ISSUED
SUSPENSE RECEIPT NUMBER	

SECTION A — CURRENTLY LICENSED AS

Operator Instructor

SECTION B — REASON FOR SUBMISSION *Check all that apply and complete the sections indicated.*

- | | |
|--|--|
| <input type="checkbox"/> Change of School Name (DBA), <i>Complete Sections C, D, and H</i> | <input type="checkbox"/> Name Change, <i>Complete Sections C, E, and H</i> |
| <input type="checkbox"/> Change of School Address, <i>Complete Sections C, D, and H</i> | <input type="checkbox"/> Duplicate License, <i>Complete Sections C, F, and H</i> |
| <input type="checkbox"/> Additional School Business Name, <i>Complete Sections C, D, and H</i> | <input type="checkbox"/> Transfer, <i>Complete Sections C, G, and H</i> |

SECTION C — APPLICANT INFORMATION

TRUE FULL NAME (FIRST, MIDDLE, LAST)		AREA CODE/TELEPHONE NUMBER ()	
RESIDENCE ADDRESS	CITY	STATE	ZIP CODE
CALIFORNIA DRIVER'S LICENSE	EXPIRATION DATE	OPERATOR OR INSTRUCTOR NUMBER	EXPIRATION DATE

SECTION D — CHANGE OF SCHOOL NAME, SCHOOL ADDRESS, AND ADDITIONAL SCHOOL DBA

SCHOOL NAME	TVS LICENSE NUMBER TVS
SCHOOL ADDRESS	CITY STATE ZIP CODE
ADDITIONAL SCHOOL DBA	
FORMER SCHOOL NAME	
FORMER SCHOOL ADDRESS	CITY STATE ZIP CODE

SECTION E — NAME CHANGE

FORMER NAME

SECTION F — DUPLICATE LICENSE

- On or about _____ my Traffic Violator School Operator's Traffic Violator School Instructor's License for TVS _____ was:
- DATE LICENSE NUMBER
- | | |
|--|--|
| <input type="checkbox"/> Lost | <input type="checkbox"/> Identification Card Only |
| <input type="checkbox"/> Stolen | <input type="checkbox"/> Wall License Only |
| <input type="checkbox"/> Mutilated (<i>must be surrendered</i>). | <input type="checkbox"/> Both Identification Card/Wall License |

SECTION G — TRANSFER *Identification Card must be surrendered for transfer applications.*

NEW SCHOOL NAME	TVS LICENSE NUMBER TVS
SCHOOL ADDRESS	CITY STATE ZIP CODE
FORMER SCHOOL NAME	TVS LICENSE NUMBER TVS

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF NEW SCHOOL OWNER X	DATE
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SECTION H — CERTIFICATION BY APPLICANT

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

SIGNATURE OF APPLICANT X	DATE
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