

INTERNATIONAL DRIVER'S LICENSE APPLICATION

COMPLETE AND MAIL APPLICATION TO:

IDL TRAVEL
PO BOX 721
OLD BRIDGE, NJ 08857

PERSONAL INFORMATION

First Name:	Middle Initial:	Last Name:
Address:		
City:	State/Province:	ZIP/Postal Code: Country:
Date of Birth: (MM/DD/YYYY)	Country of Birth:	
Gender: Male Female (Please circle)	Eye Color:	Height: cm / Feet Inches

SHIPPING ADDRESS (IF DIFFERENT FROM ABOVE)

First Name:	Middle Initial:	Last Name:
Address:		
City:	State/Province:	ZIP/Postal Code: Country:

CONTACT INFORMATION

E-Mail:	Phone:
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ORIGINAL DRIVER'S LICENSE INFORMATION

License Number:	
Country:	
Expiration Date: (MM/DD/YYYY)	
Category Of Native Driver's License:	<input type="checkbox"/> A Motorcycles <input type="checkbox"/> B Passenger Cars <input type="checkbox"/> C Vehicles over 7,700 lbs <input type="checkbox"/> D Vehicles with over 8 seats <input type="checkbox"/> E Trucks with Trailers <i>(select all that apply)</i>

INTERNATIONAL DRIVER'S LICENSE SELECTION

Validity:	<input type="checkbox"/> 1 Year License <input type="checkbox"/> 3 Year License <input type="checkbox"/> 5 Year License <input type="checkbox"/> 10 Year License	\$ 25.00 \$ 39.00 \$ 55.00 \$ 65.00
Add-Ons:	<input type="checkbox"/> Resident State ID Card <input type="checkbox"/> IDL Insurance <input type="checkbox"/> Additional License (two copies) <input type="checkbox"/> Additional Booklet (two copies) <input type="checkbox"/> Additional State ID Card (two copies)	\$ 20.00 \$ 9.99 \$ 9.99 \$ 9.99 \$ 9.99

TERMS & CONDITIONS

PLEASE READ CAREFULLY BEFORE SIGNING THIS APPLICATION:

I acknowledge that I may not drive anywhere without a valid driver's license. I acknowledge that my international driver's license is not a standalone document and must be accompanied by a government issued driver's license. I pledge to follow all city, state, federal, and international traffic regulations required by law. I hereby certify that my driver's license is not currently suspended or revoked. I release IDL Travel from any and all said liability caused by misrepresentation on my behalf. I further release IDL Travel from any and all liability caused by my failure to comply with any local, state, or international laws.

Please make check or money order payable to "IDL Travel"

Shipping & Handling Fees:	<u>United States Shipping Rates</u> <input type="checkbox"/> USPS Priority Mail <input type="checkbox"/> Express Mail (2-3 Business Days) <input type="checkbox"/> FedEx Next Day (Overnight)	\$ 8.00 \$ 20.00 \$ 35.00
	<u>International Shipping Rates</u> <input type="checkbox"/> FedEx Ground (7-10 Business Days) <input type="checkbox"/> FedEx Express (3-5 Business Days)	\$ 39.00 \$ 55.00

TOTAL: _____

ADDITIONAL REQUIREMENTS

PLEASE BE SURE TO INCLUDE THE FOLLOWING:

- ONE COLOR PHOTO
- COPY OF YOUR GOVERNMENT-ISSUED DRIVER'S LICENSE

SIGNATURE (SIGN BELOW)