

SUPPLEMENTAL DRIVER'S LICENSING HISTORY

(CDL applicants only)

Purpose: A Commercial Driver License (CDL) applicant transferring to Virginia from out-of-state uses this form to record all driver's licenses issued in the past 10 years. Applicants for a CDL renewal or reissue complete this form only if a driver's license history check has not been previously performed.

Instructions: Submit this form with your Commercial Driver's License (CDL) Application (DL2P) to any DMV customer service center.

APPLICANT INFORMATION				
FULL LEGAL NAME (last)	(first)	(middle)	(suffix)	DMV CUSTOMER NUMBER
RESIDENCE ADDRESS <input type="checkbox"/> Check if this is a new address		CITY	STATE	ZIP CODE
CITY OR COUNTY OF RESIDENCE		DAYTIME TELEPHONE NUMBER		
MAILING ADDRESS (if different from above)		CITY	STATE	ZIP CODE

DRIVER LICENSE HISTORY				
List all driver licenses issued to you during the past 10 years.				
	JURISDICTION	LICENSE NUMBER	LICENSE ISSUE DATE	LICENSE EXPIRATION DATE
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				

CERTIFICATION	
I certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and correct. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.	
APPLICANT SIGNATURE	DATE (mm/dd/yyyy)