

**Department of Business and Industry
Nevada Transportation Authority
Driver Permit Application**

3300 W. Sahara Ave, Ste. 200, Las Vegas, NV 89103
1755 East Plumb Ln, Ste 229, Reno, NV 89502
Telephone:(702) 486-3303 or (775) 688-2800

Date Received: (NTA use only)

**Application must be filled out completely.
Incomplete or illegible forms will not be accepted.**

Have you applied for a permit previously? Yes () No () Is this a Renewal? Yes () No ()				
PERSONAL INFORMATION				
Last	First	MI	Driver's License #	State
Other Names You Have Used (Maiden, etc.)		Social Security #	Date of Birth ____/____/____	<input type="checkbox"/> Male <input type="checkbox"/> Female
Mailing Address			Primary Phone	
City	State	Zip Code	()	
Residential Address			Alternate Phone	
City	State	Zip Code	()	
Email Address:				
EMPLOYMENT INFORMATION				
CPCN	Employer(s) Applying for:			Start Date
CHILD SUPPORT INFORMATION				
Mark the appropriate response (failure to mark one of the three will result in denial of your application)				
<input type="checkbox"/> I am NOT SUBJECT to a court order for the support of a child.				
<input type="checkbox"/> I am SUBJECT to a court order for the support of one or more children and in compliance with the order or in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.				
<input type="checkbox"/> I am subject to a court order for the support of one or more children and am NOT in compliance with the order or am NOT in compliance with a plan approved by the district attorney or other public agency enforcing the order for the repayment of the amount pursuant to the order.				

Affidavit of Applicant / Authorization of Release

I, _____, certify that I am the person described and identified in this application; I have answered all the questions truthfully and completely, and any documents that I have provided in support of my application are, to the best of my knowledge, accurate. I authorized all governmental agencies and municipalities (local, state, federal and foreign) to release to the Nevada Transportation Authority any information, files, or records required by the Authority in connection to processing this application. I understand that furnishing false or misleading information or failing to furnish required information on this application may cause for the denial, suspension, or revocation of my driver permit with the Nevada Transportation Authority.

Signature of Applicant

Date

Office Use Only:

Eligible: _____

Unpaid Fines: _____ Date Checked: _____

Results Date: _____ (circle one) **P N P-HR**

5 or more Citations in last 3 yrs.: **Yes** or **NO**