



Department of Transportation

**To Report a Never-Received Permit**

(Please print the information requested)

**THIS FORM MUST BE NOTARIZED**

Permit Holder's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Home Address: \_\_\_\_\_ Apartment #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone # \_\_\_\_\_ Mobile Device # \_\_\_\_\_

Email: \_\_\_\_\_

Permit Type? (Please circle)      City      Permit # \_\_\_\_\_

                                                 State      Permit # \_\_\_\_\_

*I declare, under penalties of the penal law Section 210.45, that the statements contained herein are, to the best of my knowledge and belief, true and correct and that I have not knowingly and willfully made a false statement or given information which I know to be false. Making a punishable false written statement is a Class A misdemeanor.*

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_\_  
Signature of Permit Holder/Parent/Guardian

(If another person must sign, state name & relationship)

**Please note that your signature must be notarized. Sign only in the presence of a Notary Public.**

**Once completed, mail this form to the address listed in the lower left corner of this form.**

Signature witnessed on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public