

NOTICE OF CHANGE OF ADDRESS

LICENSE
NUMBER _____ MAKE _____

SERIAL NUMBER _____
CHANGE ADDRESS OF REGISTERED OWNER OF MOTOR VEHICLE
DESCRIBED ABOVE TO:

(STREET ADDRESS, APT NO/P O BOX)

(CITY, STATE, ZIP)

(PRINTED REGISTERED OWNER NAME AS IT APPEARS ON
CERTIFICATE OF REGISTRATION)

(SIGNATURE OF REGISTERED OWNER) (DATE)