

ID Card Renewal Application and Voter Registration Instructions

Thank you for participating in the ID Card Renew-By-Mail Program! You are eligible to renew your ID Card at any time during the period of the ID Card but may only renew by mail every other renewal period. If you are eligible to renew by mail you may also renew online at www.colorado.gov/vroom/ If you are registered to vote from your current address or do not need to report a change of address to the election commission, you do not need to return page one of this application.

Please be sure to fill out the application completely. Your application will be rejected if you fail to enclose your check, fail to sign your application or fail to complete all required fields. Please allow eight weeks to process your application. The form is designed to be printed in color or black and white on 8.5" x 11" paper.

Voter Registration Application

<p>“WARNING”: It is a Class 1 misdemeanor to swear or affirm falsely as to your qualifications to register to vote. If you decline to register to vote, the fact that you have declined to register will remain confidential and will be used only for voter registration statistics purposes.</p>					
<p>Do Not Complete The Rest Of This Section Unless You Are Registering To Vote.</p>					
Do you wish to be designated as a Permanent Mail-in Voter? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Name		Sex	Are you a citizen of the U.S.?	Political Affiliation	
Date of Birth	Social Security Number (optional)		<input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Republican <input type="checkbox"/> Democrat <input type="checkbox"/> Unaffiliated <input type="checkbox"/> Other _____
Colorado Residence Address			County	Former Voter Registration Address	
City	State	ZIP Code	County	City	State
Current Mailing Address			County	Former Name	
City	State	ZIP Code			
<p>I _____ do solemnly affirm that I am a citizen of the United States and that on the date of the next election I shall have attained the age of 18 years, and shall have resided in the state of Colorado at least 30 days and in my precinct at least 30 days before the election. I further affirm that the present address I listed herein is my sole legal place of residence and that I claim no other place as my legal residence.</p>					
Voter Registration Application Signature			Date	Phone Number (optional) ()	

Identification (Required) Do Not Leave This Section Blank

Pursuant to Federal Law, your completed voter registration form **must contain** your **State of Colorado Driver's License Number** or **Identification Card Number**. If you do **not** have a Driver's License or Identification Card Number, then you must provide the **last four digits** of your Social Security Number. If you do **not** have a Driver's License Number, Identification Card Number, or Social Security Number, you must check the appropriate boxes. A unique identifying number will be assigned to you by the State and you will still be registered to vote.

NOTE: If the identification section is left blank and you do not check the boxes indicating you do not have identification, your application to register to vote will be invalid.

Colorado Driver's License Number

--	--	--	--	--	--	--	--	--	--

OR

Colorado ID Card Number

--	--	--	--	--	--	--	--

I do not have a Colorado Driver's License or Identification Card Number.

OR

If you do not have a Colorado Driver's License, or Identification Card Number, then provide at least the last four digits of your Social Security Number.

Social Security Number

--	--	--	--	--	--	--	--

I do not have a Social Security Number

ID Card Renewal Application

State of Colorado, Department of Revenue-RBM, Denver CO 80217-3350

ID Card holders may renew by mail by completing this form and returning it with payment or by going online at www.colorado.gov/vroom. Your new ID Card will be printed using your photograph currently on file.

Please allow eight weeks to process your application. If you wish to have your name changed or a new photograph taken, you must appear at a driver's license office.

You may add up to 2 emergency contacts to your Driver's License or ID card record, please visit our web site at <https://www.colorado.gov/apps/dor/emergency/contact/>

Please Print Name Exactly as it Appears on Current ID Card											
First			Middle					Last			Suffix
Height		Weight		Hair		Eyes		← Please Enter Current Information			
ID Card Number			-							← Please Enter Current ID Card Number This is required to process your application.	
Date of Birth			-								
ID Card Renewal											
Colorado Residence Address											
City							State		ZIP Code		
Current Mailing Address											
City							State		ZIP Code		
Social Security Number				-						← Social Security Number This is required to process your application.	
C.R.S. 42-2-107(3)(a), requires your Social Security Number to process your application for an ID Card. Your Social Security Number will NOT be printed on your ID Card.											
For males 18 years of age and older: By submitting this application, I am consenting to being registered with Selective Service if so required by Federal law.											
Your Application Will be Rejected If You: <ul style="list-style-type: none"> ● Fail to record your ID CARD number in the box above ● Fail to include the correct fee ● Fail to sign the application ● Fail to complete the entire form including your Social Security Number 								Please remember to enclose your check or money order.			
I attest under penalty of perjury, that I am a resident of the state of Colorado.										<input type="checkbox"/> No <input type="checkbox"/> Yes	
I attest under penalty of perjury, that I am lawfully present in the United States.										<input type="checkbox"/> No <input type="checkbox"/> Yes	
I hereby certify that the above information, including my Social Security Number, is true and correct and I understand that any false information given will be cause for the cancellation of my driving privilege.											
Signature of Applicant								Date			

