



555 Wright Way
Carson City, Nevada 89711
NV LIVE: 775-684-4850
Fax: 775-684-4543
Driver's License: 775 684-4368
Fax: 775-684-4829
www.dmvnv.com

PROCESSING CENTER PAYMENT CARD AUTHORIZATION FORM

Name _____ Date _____
(Name as it appears on Registration or Driver License)

Nevada Driver's License, Identification Card
Number, Date of Birth, or FEIN for businesses _____

Physical Address _____
Street / P.O. Box City State Zip Code

Mailing Address _____
Street / P.O. Box City State Zip Code

Telephone Number () _____

Select _____ Payment Amount \$ _____
Payment Type: ATM/Debit * _____
Credit _____ Master Card _____ Visa _____ Discover Card _____

ATM/Debit or Credit Card Number (one number per box)
[] [] [] [] - [] [] [] [] - [] [] [] [] - [] [] [] []

Please Print or Type Cardholder Information Expiration Date
Cardholder's Printed Name _____
Cardholder's Telephone () _____ Cardholder's Zip Code _____
Month / Year

I authorize the DMV to use my credit card to reinstate the registration / Driver License for: _____
Printed Name

Authorized Cardholder's Signature _____ Date _____

*I understand and agree that by checking "ATM/Debit" or "Credit" I am authorizing the DMV to debit or charge my account for the amount specified above. Further, I understand and agree that if an ATM/Debit transaction fails or is declined, I am authorizing the DMV to complete the transaction as a credit card charge, if possible.

NV LIVE VEHICLE SUSPENSION:
If you did not have insurance during the specified dates and wish to pay the reinstatement fee/fine by credit card, complete the attached credit card form and return it with a current Nevada Evidence of Insurance and Declaration of Responsibility (NVL-019), by mail Attention DMV NV LIVE or fax to the number listed above*. (Please ensure form is faxed to the appropriate number listed above.)
License Plate Number: _____
Vehicle Identification # (VIN): _____

DRIVER'S LICENSE CLEARANCE LETTER-SR-22 WAIVER AFFIDAVIT:
Driver's License Number: _____
Initial EACH of the following as required for reinstatement of Driver's License when an SR-22 is mandatory:
1. I do not have a Nevada Driver's License - License will be surrendered.
2. I do not have any vehicles registered in the state of Nevada - Plates will be surrendered.
SIGNATURE: _____ DATE: _____