Claim for Replacement Driving License

Your Name: [Your Name]

Address: [Your New Address]

City, State, Zip Code: [City, State, Zip Code]

Email: [Your Email]

Phone Number: [Your Phone Number]

Date: [Date]

Department of Motor Vehicles

[DMV Address]

[City, State, Zip Code]

Dear Sir/Madam,

I am writing to formally request a replacement for my driving license, which I need to update due to my recent relocation. I have moved from [Previous Address] to my new address at [Your New Address].

My details are as follows:

- **Full Name:** [Your Full Name]
- **Previous License Number:** [Your License Number]
- **Date of Birth:** [Your Date of Birth]

I would appreciate your assistance in processing this request as soon as possible, as I require my driving license for identification and travel purposes.

Thank you for your attention to this matter. I look forward to your prompt response.

Sincerely,

[Your Signature (if sending a hard copy)]

[Your Printed Name]