



Iowa Department of Transportation
Application for Temporary
Extension of Motor Vehicle License

Name _____ Iowa Driver License Number _____
(Print or type name in full)

Iowa Address _____ City and State _____
(Street or route number)

Date of Birth _____ Expiration Date _____

I request a temporary extension of my valid motor vehicle license for the following reason(s): _____

I hereby certify that the above statements are true and that my motor vehicle license or driving privilege is not under suspension, revocation, disqualification, cancellation or denial in Iowa, or any other jurisdiction at this time.

Applicant's Signature _____ Date _____

Iowa Code section 321.182 requires you to notify the Iowa Department of Transportation within 30 days of any change in your mailing address. This notification must be made in writing or in person at any driver license station.

Mail this application to:

Iowa Department of Transportation
Office of Driver Services
P.O. Box 9204
Des Moines, IA 50306-9204
(515) 244-8725

Mail extension to: *(must be out-of-state address)*

Section 321.196, Code of Iowa, reads in part:

"Any resident of Iowa holding a valid motor vehicle license who is temporarily absent from the state, or incapacitated, may, at the time for renewal for such motor vehicle license, apply to the department for a temporary extension of the license. The department upon receipt of such application shall, upon showing good cause, issue a temporary extension of the motor vehicle license for not to exceed six months."