555 Wright Way
Carson City, NV 89711
Reno/Sparks/Carson City (775) 684-4DMV (4368)
Las Vegas area (702) 486-4DMV (4368)
Rural Nevada or Out of State (877) 368-7828
www.dmvnv.com

Payment Type: ☐ Master Card ☐ Visa ☐ Discover Card Payment Amount $_____

Debit or Credit Card Number (one number per box)

				-					-					-				

Please Print or Type

Cardholder Information

Expiration Date

		/		

Month Year

Printed Name _____
Print your name as it appears on your card

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

Plate/Driver Lic./Bus. Lic./Records/MC Number of the transaction being processed. _____ Telephone _____

Authorized Signature _____ Date _____
By signing this form, you give us permission to debit your account for the amount indicated on or after the indicated date.

VP-205 (Rev. 5/2017)

I authorize the DMV to charge the credit/debit card indicated in this authorization form according to the terms outlined above. This payment authorization is for the amount indicated above only and is valid for one-time use only. I certify that I am an authorized user of this credit/debit card and that I will not dispute the payment with my credit/debit card company so long as the transaction corresponds to the terms indicated in the form.

*Printed form is 3.5” x 7.5”