

**Physical Address:** 1801 N. Lincoln Blvd. Oklahoma City, OK 73105 (405) 521-3852

incoln Blvd. **Mailing Address**: ODWC na City, OK 73105 P.O. Bo

P.O. Box 53465 Oklahoma City, OK 73152

## **OKLAHOMA RESIDENT LIFETIME LICENSE APPLICATION**

APPLICATION MUST INCLUDE:				
Photocopy of Oklahoma Driver's License or Oklahoma State ID (Must be held for 6 months prior to application.)  Residency status is determined based on which state you hold your driver's license in.  Applicants with an out-of-state driver's license DO NOT qualify for any lifetime resident licenses.				
☐ Applicants Under 18 MUST Submit One: Photocopy of Parent or Guardian's Oklahoma Driver's License or Copy of Previous Year Oklahoma State Filed Taxes Dependents Page (Federal Tax Forms NOT Accepted)  ** Driver's License submission is not required if application is signed by ODWC Employee**				
☐ Cashier's Check, Money Order, Personal Check, or Credit Card Info (Mastercard, Visa, Discover)				
<u>Select One</u> : [ ] C			[ ] FISHING \$	375
Full Legal Name Last Name	First Name		Middle Name	
Date of Birth/ Last 4 of Social Security Number (required)				
Mailing Address	City	State_	Zip	County
Physical Address	City	State_	Zip	County
Phone Number ()	Email Address			
/ears at Current Address NO Nolation (Check One) YES NO				
Hunter Education #	State of Is	ssue[	late of Compl	etion//
Driver's License #	_Statels	ssue Date/	/Expir	ation//
*ANY FALSE STATEMENT OR FALSE INFORMATION			ELONY, OR OTH	ER BREACH OF LAW.*
I certify under penalty of perjury under the laws of Oklahoma that the above information is true and of I, or the above applicant, have been a bonafide peo of Oklahoma, as defined in Title 29 of the Oklahom for six months immediately proceeding the date of and that the applicant intends to remain an Oklah	APPLICATION WILL BE RETURNED IF:  □ Copy of Oklahoma Driver's License or ID Not Included □ OK Driver's License Does Not Fulfill Residency			
X/		☐ Received with Out-of-State Identification		
Signature of Applicant or Preparer Date		☐ Incomplete Application		
X/	# Date			
(Not required if copy of Driver's License/ID pr	ovided)			
To charge this purchase to your Discover, Visa, or MasterCard, complete the section below:  Card Number:				
Card Holder Name:				
Card Holder Address: Signature:				