INTERNATIONAL DRIVING PERMIT APPLICATION INSTRUCTIONS

Please print out the application. A hard copy of the signed application will be necessary.

If you are over 18 years of age and a U.S. licensed driver, complete the application in its entirety (including your signature - just as it appears on your license).

Along with your application you will need to enclose two (2) original passport size photographs of you. Also required is a clear readable photocopy of the front and back of your U.S. driving license. Please sign the photocopy to validate its authenticity.

Include full payment for the permit and shipping & handling. Permit fee is U.S. $15.00 and various applicable shipping & handling fees are itemized on the application itself. Payment can be made by check, money order, or by major credit card. If paying by credit card – please be sure to include card number, expiration date, and authorizing signature on the application.

Mail your application with attachments to:

National Automobile Club
Attn: IDP
373 Vintage Park Drive, STE E
Foster City, CA 94404

Important Notes:

1 Your request will only be processed if:
   Application is completely filled-out and signed
   Required attachments are received along with application
   Payment in full is received along with application.

2 This International Driving Permit is valid for one year from the date of issuance, and must be carried by you along with your valid U.S. driving license at all times. This permit is not valid while driving in the United States.

3 Normal processing time is 10 to 15 business days plus shipping time. Expedited processing and shipping can be purchased. For expedited service, select the appropriate shipping and handling option.

4 Your U.S. driving license must be valid at least 6 months beyond the issuance date of your IDP.

5 Original documents (pictures) are required and, therefore, email applications cannot be accepted.

6 For further information see Frequently Asked Questions (FAQ’s) for IDP’s on this website, or email us at The National Automobile Club: contact@thenac.com.

7 For up to date driving requirements, it is recommended that required permits are confirmed with the destination country.
INTERNATIONAL DRIVING PERMIT APPLICATION

Please print names as shown in your U.S. driving license.

First Name_________________ Middle Name ____________  Last Name _________________
Street Address______________________________________________________________
City_______________________ State __________________ Zip Code _________________

U.S. Driver's License Number__________________ Expiration Date ________ Issuing State _______
Birthplace City _____________________ State or Country of Birth ________________________
Date of Birth      Month____  Day_____  Year_______     E-mail___________________________
Foreign Travel Departure Date __________  Foreign address _____________________________
Daytime Foreign Phone___________________ Daytime U.S./Domestic Phone____________________

Your International Driving Permit will be validated to match your U.S. driving license class. Please check appropriate space:

❑ Passenger Car  ❑ Motorcycle*  ❑ Vehicles over 7,700 lbs.  ❑ Vehicles over 8 seats including driver

* If you want a motorcycle validation you must have the same class or endorsement shown on your driving license.

I certify the above to be true and correct. Sign as shown on Driving License.

Signature: __________________________________________   Date: __________________

Remittance:

  Driving Permit fee ($15.00 USD)        $15.00
  Shipping and Handling (choose one)
    via: U.S. Domestic 1st Class ($5.00) 
    via: U.S. Domestic Priority Mail ($10.00)**
    via: U.S. Domestic Next Day delivery ($35.00)
    via: International 1st Class delivery ($10.00)
    via: International Priority; 15+ business days ($35.00)
    via: International Courier; 3-5 business days ($85.00)***

  Total      $ ___________

** FPO and APO addresses must select shipping and handling via U.S. Domestic Priority mail.
***Additional fees may apply dependent on destination.

Method of Payment:  ❑ Check  ❑ Money Order  ❑ Credit Card
Card (check one):  ❑ Visa  ❑ MasterCard  ❑ American Express

Card Number ______________________________   Expiration Date:  Month ______  Year ______
Credit Card billing Zip Code ____________  Authorized Signature ___________________________

MAILING LABEL

NAME

STREET/APT. #

CITY    STATE/PROVINCE    ZIP/POSTAL CODE    COUNTRY