

**Written Request for Driver Licence/ID Card Cancellation Form**  
(please print form, complete, sign and upload it)

**Date of Request:** \_\_\_\_\_

**Driver Licence/ID card number or MVID:** \_\_\_\_\_

**Full Name as it appears on licence/ID card:**

\_\_\_\_\_

**Mailing Address:**

\_\_\_\_\_

**Daytime Phone Number:** \_\_\_\_\_

**By signing this form, you acknowledge that you are giving Millwoods Registry Services Ltd. authorization to cancel your driver licence or ID card. You should destroy your driver licence or ID card immediately.**

**Signature:** \_\_\_\_\_