



A Public Service Agency

AFFIDAVIT FROM COURT

Habitual Traffic Offender

(Section 13350(b) CVC)

309

1. NAME	2. DRIVER LICENSE NUMBER
3. ADDRESS	IF NEW ADDRESS PLEASE CHECK HERE <input type="checkbox"/>
CITY	4. DATE OF BIRTH
5. ACTION TAKEN <p style="text-align: center;">Revoked</p>	6. EFFECTIVE DATE (Date of Conviction)
7. DOCKET NO.	8. COURT CODE

I certify under penalty of perjury, that I understand my driving privilege is revoked and I have been designated as an habitual traffic offender.

9. SIGNATURE OF PERSON SERVED X	DATE
10. ADDRESS	
CITY	

IMPORTANT: A copy of this affidavit shall be transmitted with the license to the Department of Motor Vehicles under the authority of Section 1803(a) of the California Vehicle Code.

Mail to: Department of Motor Vehicles
P. O. Box 942890
Sacramento, CA 94290-0001

INSTRUCTIONS FOR COMPLETING DL 309

STEP	PROCEDURE	
1	Enter first, middle and last name.	
2	If license is . . . From California From out-of-state Not Available	Then enter . . . Number Number and state "X" prefix file number or none
3	Enter current mailing address. If a P.O. Box, show residence address in section 10. If new address, please check box.	
4	Enter month, day and year.	
5	No entry required.	
6	Enter effective date of conviction.	
7	Enter docket number.	
8	Enter court code.	
9	Please have the person served sign and date this affidavit.	
10	Enter residence address if different from address in step 3.	

