

**LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF MOTOR VEHICLES**

REQUEST FOR BLACK AND WHITE PHOTO

Applicant's Name			Request Date		
Date of Birth			Male <input type="checkbox"/>	Female <input type="checkbox"/>	Race
License No.		No. of Copies		Date Issued	
<p>OFFICE</p> <p>USE</p> <p>ONLY</p>					
Type of Business: <input type="checkbox"/> Law Enforcement <input type="checkbox"/> Private Investigator <input type="checkbox"/> State Agency <input type="checkbox"/> Company <input type="checkbox"/> Individual					
Requested By (Section)		Name			Phone No.
Fax No.		Delivery Option: <input type="checkbox"/> Fax <input type="checkbox"/> Pickup <input type="checkbox"/> Mail To:			
Action: <input type="checkbox"/> Letter Mailed to Applicant <input type="checkbox"/> Faxed <input type="checkbox"/> Picked Up <input type="checkbox"/> Mailed					
Received Date		Processed Date		Processed By:	

DPSMV 2109 (R 05/09)