



ITAC - INTERNATIONAL DRIVER'S DOCUMENT



Mailing Address:
ITAC- Inc.
P.O. Box 11481
Birmingham, AL 35202

Street Address:
ITAC- Inc.
417 Valley Avenue
Birmingham, AL 35209

1-888-415-9993
Go to Online (24hrs Fast)
www.itac-club.com

APPLICATION FORM

NAME:

DATE:

LAST NAME:

FULL ADDRESS OF RESIDENCE:
(City & State, Zip)

COUNTRY OF RESIDENCE:

COUNTRY OF DRIVER LICENSE:

COUNTRY OF BIRTH:

SEX:

EYES:

HEIGHT:

NUMBER OF DRIVER LICENSE:
(IDENTIFICATION NUMBER IN YOUR CURRENT DRIVING PERMIT)

CONTACT TELEPHONE: (PLEASE INCLUDE COUNTRY CODE IF OUTSIDE US)

DRIVING CATEGORY:

- A** MOTORCYCLES, WITH OR WITHOUT SIDE CAR.
- B** MOTORVEHICLES - TRANSPORT OF PASSENGERS (MAX 8 SEATS).
- C** MOTORVEHICLES - TRANSPORT OF GOODS.
- D** MOTORVEHICLES - TRANSPORT OF PASSENGERS (MORE THAN 8 SEATS).
- E** MOTORVEHICLES OF CATEGORIES B, C OR D.

E-MAIL ADDRESS:

INTERNATIONAL DRIVER'S DOCUMENT VALIDITY:

- 1 Yr:** \$ _____ + **Shipping Cost** \$ _____ **Total** \$ _____
- 2 Yrs:** \$ _____ + **Shipping Cost** \$ _____ **Total** \$ _____
- 3 Yrs:** \$ _____ + **Shipping Cost** \$ _____ **Total** \$ _____

I PLEDGE TO FOLLOW ALL CITY, STATE, FEDERAL & INTERNATIONAL TRAFFIC REGULATIONS REQUIRED BY LAW. I ACKNOWLEDGE THAT I MAY NOT DRIVE ANYWHERE WITHOUT A VALID DRIVER'S LICENSE. I WILL OBEY ALL OF THE RULES AND REGULATIONS OF THE UN CONFERENCE OF ROAD TRAFFIC IN 1923, 1943, 1949 AND 1968. I ACKNOWLEDGE THAT THIS DOCUMENT IS ONLY A DRIVER'S LICENSE TRANSLATION AND IS VALID ONLY WITH A DRIVER LICENSE. I HEREBY CERTIFY THAT MY DRIVER LICENSE IS CURRENTLY VALID AND WAS NEVER SUSPENDED OR REVOKED.

MAILING ADDRESS: (DELIVERY LOCATION / NOT NECESSARY IF SAME ABOVE)

MAILING COUNTRY:

SIGNATURE:

2X2 COLOR PHOTO

Payment Type:

Make a Payment by Check or Credit Cards (Payable to ITAC)



Check# _____

Name of Card _____

Credit Card # _____ Exp: _____

Cardholder Signature X _____

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