



Form **4160**
Missouri Department of Revenue
Address Change Request

Name (Last, First, Middle)		
Birthdate (MM/DD/YYYY) ____/____/____	Last four digits of your social security number _____	Daytime Telephone Number (____)____-____

Old Address (Optional)	Mailing Address			New Address	Mailing Address		
	City				City		
	County	State	Zip Code		County	State	Zip Code

Records to be Updated	<input type="checkbox"/> Driver License Records - This change also includes instruction permits and nondriver licenses. Note: You must complete an application at a local Missouri License Office if you want your Missouri driver license, nondriver license or instruction permit to reflect your new address. Driver license record address change questions: (573) 526-2407	
	Name (Last, First, Middle)	Driver License Number

<input type="checkbox"/> Individual Income Tax Records - Individual income tax address change questions: (573) 751-3505

<input type="checkbox"/> Motor Vehicle Records - Motor vehicle record address change questions: (573) 526-3669
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Records to be Updated	List all passenger car, truck, recreational vehicle, motorcycle and trailer plates below:	List all disabled placards below:																			
	<table style="width:100%"> <thead> <tr> <th style="text-align: center;">License Plate Number</th> <th style="text-align: center;">Exp. year</th> </tr> </thead> <tbody> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </tbody> </table>	License Plate Number	Exp. year	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<table style="width:100%"> <thead> <tr> <th style="text-align: center;">Disabled Placard Number</th> <th style="text-align: center;">Exp. Year</th> </tr> </thead> <tbody> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> <tr><td><input type="text"/></td><td><input type="text"/></td></tr> </tbody> </table>	Disabled Placard Number	Exp. Year	<input type="text"/>	<input type="text"/>	<input type="text"/>
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	List all boat or outboard title numbers below:																				
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Business Tax Records - To request a change of address for a business, complete a Registration Change Request (Form 126), which can be obtained on our website at dor.mo.gov/forms/126.pdf . Business tax address change questions: (573) 751-5860

Signature	Under penalties of perjury, I declare that the above information and any attached supplement is true, complete, and correct.	
	Signature	Printed Name
	E-mail Address	Date (MM/DD/YYYY) ____/____/____