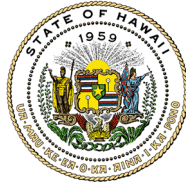


JOSH GREEN, M.D.
GOVERNOR
KE KIA'ĀINA



STEPHEN L. LOGAN
MAJOR GENERAL
ADJUTANT GENERAL
KA 'AKUKANA KENELALA

JOHN P. ALAMODIN
LTC COLONEL
DIRECTOR

STATE OF HAWAII
KA MOKU'ĀINA O HAWAII
DEPARTMENT OF DEFENSE
KA 'OIHANA PILI KAUA
OFFICE OF VETERANS' SERVICES
PO BOX 5384, HILO, HAWAII 96720
Telephone Number (808) 369-3538

HAWAII OFFICE OF VETERANS SERVICES (HOVS)

DMV WORKSHEET REQUEST (Hawaii County) THE FOLLOWING:

- **Vehicle Registration Waiver – OVS Form 12**
- **Veteran License Plate**
- **Veteran Designation on Driver's License**

Our office only processes the above requests by USPS mail at this time and walk-ins are not available at our location. If you wish to obtain one or more of the above requests, please review the corresponding section below for more information. Each benefit requires supportive documents to establish eligibility. At this time all requests are handled by USPS mail correspondence to our current mailing address, State of Hawaii, Department of Defense, Office of Veterans Services, PO Box 5384, Hilo, HI 96720 or you may email us the supportive documents to hovs@hawaii.gov.

All OVS DMV Request Cover letters require a wet signature, and these documents can only be mailed to a valid mailing address.

Please include this worksheet form along with your supportive documents attached for quick and efficient processing of your request. Our team will process your request in the order it is received and a Hawaii OVS cover letter verifying your eligibility for the DMV request will be mailed to your mailing address below. Veterans may take their cover letters provided by our office to the County of Hawaii DMV location of their choice to complete their request. If you have any questions or concerns, you may contact our office at telephone number 808-369-3538 or email us at hovs@hawaii.gov for more information.

You **must CIRCLE below** which DMV request you are seeking. See list of required supportive documents below. You must provide supportive documents for eligibility purposes. Please attach to worksheet (submit USPS mail or email).

- **Vehicle Registration Waiver – OVS Form 12**
 - o **Copy of veteran's driver's license and current vehicle registration**
 - o **Current copy of benefits summary letter from the Department of Veterans Affairs**
(No letter date beyond 6 months prior to request)
 - o **Vehicle Registration Information** (Veteran must be listed as registered owner of vehicle)
- **Veteran License Plate** (HRS 249 – 9.2 – VERS. December 2024)
 - o **"VETERAN" Plate will be provided** as default unless specified otherwise
 - o **Copy of Driver's License**
 - o **Copy of DD214 – Member 4**
- **Veteran Designation on Driver's License or State of Hawaii I.D.**
 - o **Copy of Driver's License**
 - o **Copy of DD214 – Member 4**

VETERAN PLATE DESIRED: _____

PLEASE LIST YOUR CONTACT INFORMATION IN THE SPACE BELOW:

Veteran Name: _____ **Telephone Number:** _____

Current Mailing Address: _____