

eGov Screens

1 of 2

Modified to remove
Form references

4.1 - User Logon

Welcome to OFM E-Gov

Page 1 of 1



U.S. Department of State Office of Foreign Missions

Welcome to OFM E-Gov

Please enter your credentials to access the system.

User Name
Password

[Request access to this system](#)

[Photograph and Signature Card](#)

Figure 4.1-1 – Logon Dialog Window



U.S. Department of State

Office of Foreign Missions

[View User Profile](#) - [Personal Information](#) - [Authorized Missions](#) | [Main Menu](#) | [Logoff](#)

Personal Information

Logon DONNELLYPL
Surname DONNELLY
Given Name PATRICK
Middle Initial L
Mission EMBASSY OF MEXICO ANNEX D WASHINGTON, DC 20006
City WASHINGTON
State DC
Telephone (202) 895-3552
E-mail DonnellyPL@state.gov
Birth Date 08/09/1950

[Change Password](#)

Figure 4.2-1 – Personal Information Screen



Figure 4.2-2 – Change Password Screen



U.S. Department of State

Office of Foreign Missions

[Main Menu](#) | [Request a New Service](#) | [View Service Requests](#) | [View Profile](#) | [Logoff](#)

Main Menu

[Request a New Service](#)

[View Service Requests](#)

[View Your User Profile](#)

Logged In as: DONNELLYPL
Logged In since: Thu, 10/23/2008 12:47:53

Figure 4.3-1 – e-Gov Program Main Menu



U.S. Department of State

Office of Foreign Missions

View Service Requests | Main Menu | Logoff

| <u>Trans ID</u> | <u>Service</u> | <u>Subject</u> | <u>Status</u> | <u>Status Date</u> | <u>Created By</u> | <u>Created Date</u> |
|----------------------------|------------------------------|----------------|---------------|--------------------|-------------------|---------------------|
| 5000000149 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/29/08 | UC00PLD | 09/25/08 |
| 5000000150 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/25/08 | UC00PLD | 09/25/08 |
| 5000000151 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/25/08 | UC00PLD | 09/25/08 |
| 5000000152 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/25/08 | UC00PLD | 09/25/08 |
| 5000000153 | BONDED WAREHOUSE ITEMS | DONNELLYPL | ACCEPTED | 07/17/08 | UC00PLD | 09/25/08 |
| 5000000154 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/29/08 | UC00PLD | 09/25/08 |
| 5000000155 | BONDED WAREHOUSE ITEMS | DONNELLYPL | SUBMITTED | 09/28/08 | UC00PLD | 09/25/08 |
| 5000000156 | ESCORT SCREENING | JENNINGS | SUBMITTED | 09/29/08 | UC00PLD | 09/25/08 |
| 5000000157 | ESCORT SCREENING | DIEFENBAKER | SUBMITTED | 10/01/08 | UC00PLD | 09/25/08 |
| 5000000158 | ESCORT SCREENING | MITCHELL | SUBMITTED | 10/01/08 | UC00PLD | 09/25/08 |
| 5000000159 | ESCORT SCREENING | CRETIEN | SUBMITTED | 10/01/08 | UC00PLD | 09/25/08 |
| 5000029359 | TITLE | POWELL | SUBMITTED | 01/04/08 | RAMSAYWHITEB | 01/04/08 |
| 5000029364 | DRIVER LICENSE/Non-Driver ID | POWELL | SUBMITTED | 01/04/08 | RAMSAYWHITEB | 01/04/08 |
| 5000029367 | DRIVER LICENSE/Non-Driver ID | POWELL | SUBMITTED | 01/04/08 | RAMSAYWHITEB | 01/04/08 |
| 5000029397 | DRIVER LICENSE/Non-Driver ID | CORTI | SUBMITTED | 01/07/08 | MEDINAA | 01/07/08 |

Records 1 - 15 of 283

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 ▸



U.S. Department of State

Office of Foreign Missions

[Request a New Service](#) | [Main Menu](#) | [Logoff](#)

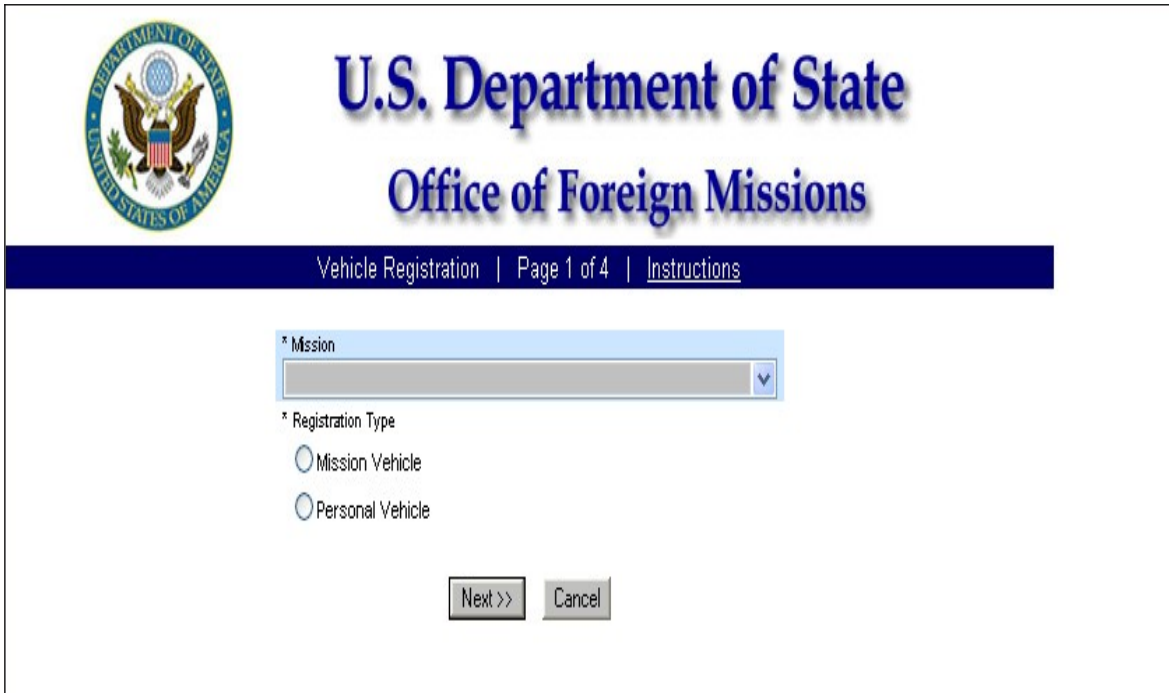
Request a Service from the list below to begin.


| | |
|-----------------|---|
| Customs | Bonded Warehouse Ordering |
| | Vehicle Registration |
| DMV | Vehicle Title |
| | Replacement Plates |
| | Driver License/Non-Driver ID |
| | Update Vehicle Insurance |
| Tax | Tax Exemption Card |
| | Exemption from Utilities Taxes |
| | Exemption from Gasoline Taxes |
| Protocol | Notification of Appointment |
| | Notification of Appointment (Honorary Consular Officer) |
| | Notification of Change |
| | Notification of Termination |

Figure 5.2-1 – Application Selection Screen.

6 – Applying for DMV Services

6.1 - Applying for a Mission Vehicle Registration



 **U.S. Department of State**
Office of Foreign Missions

Vehicle Registration | Page 1 of 4 | [Instructions](#)

* Mission
[Dropdown menu]

* Registration Type
 Mission Vehicle
 Personal Vehicle

Figure 6.1-1 – Vehicle Registration Screen 1

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg1.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 1a of 4 | [Instructions](#)

Principal Driver

I.D. Number Surname Given Name

Date of Birth

Month Day Year

Principal User

I.D. Number Surname Given Name

Date of Birth

Month Day Year

Figure 6.1-2 – Vehicle Registration Screen 1a

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg1a.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 1b of 4 | [Instructions](#)

Address Where Vehicle is Principally Garaged

| | | | | | |
|--------|----------|---------|------------|-----------|---------|
| * No | * Street | * St/Rd | Quadrant | Unit Type | Unit No |
| _____ | _____ | _____ | _____ | _____ | _____ |
| * City | | * State | * Zip Code | | |
| _____ | | _____ | _____ | | |

Figure 6.1-3 – Vehicle Registration Screen 1b

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Refresh Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg1b.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 2 of 4 | [Instructions](#)

Vehicle

| | | | |
|---------------------------------|----------------------|----------------------|-----------------------------|
| * Vehicle Identification Number | * Make | * Model | * Ownership Type |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="radio"/> Lien |
| * Body | * Year | Weight | <input type="radio"/> Lease |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="radio"/> Owned |
| * Odometer | * Color | | |
| <input type="text"/> | <input type="text"/> | | |

Figure 6.1-4 – Vehicle Registration Screen 2

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Refresh Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg2.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 3 of 4 | [Instructions](#)

Insurance Carrier

| | | |
|----------------------|----------------------|----------------------|
| * Company Name | | |
| <input type="text"/> | | |
| * Address Line 1 | | |
| <input type="text"/> | | |
| Address Line 2 | | |
| <input type="text"/> | | |
| * City | * State | * Zip Code |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
| * Phone Number | | |
| <input type="text"/> | | |

Figure 6.1-5 – Vehicle Registration Screen 3



Figure 6.1-6 – Vehicle Registration Screen 2a

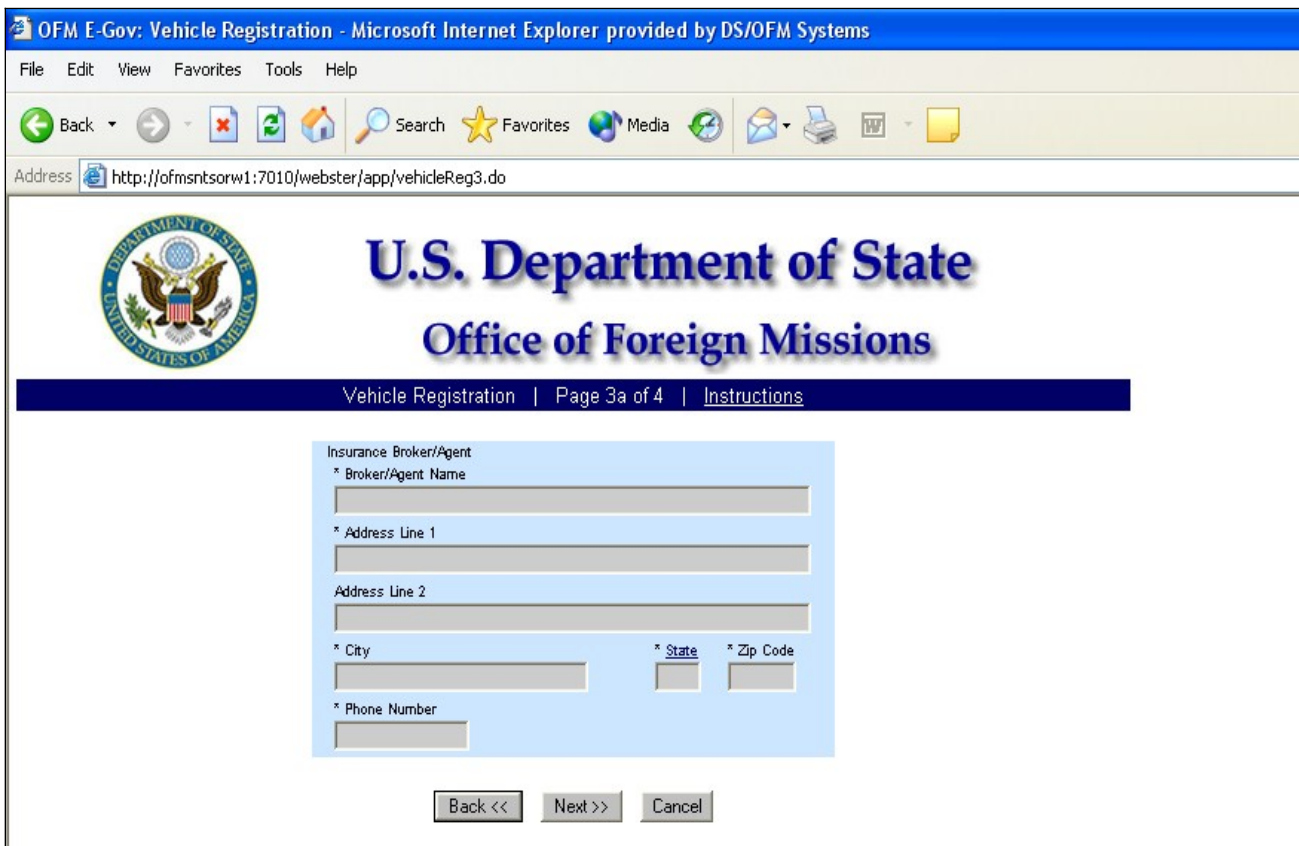


Figure 6.1-7 – Vehicle Registration Screen 3a

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg3a.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 4 of 4 | [Instructions](#)

Insurance Policy

| | Beginning Date | | | Expiration Date | | |
|---------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| * Binder or Policy Number | * Month | * Day | * Year | * Month | * Day | * Year |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

* Insurance Coverage Type

P/A/P

| | | |
|----------------------------|------------------------------|------------------------------|
| Personal Injury Per Person | Personal Injury Per Accident | Personal Damage Per Accident |
| \$ <input type="text"/> | \$ <input type="text"/> | \$ <input type="text"/> |

Combined Single Limit

Personal Injury and Property Damage Per Accident

\$

Figure 6.1-8 – Vehicle Registration Screen 4



U.S. Department of State

Office of Foreign Missions

View Form #5000045993 | View All Requested Services | Main Menu | Logoff

Transaction ID **5000045993**
 Country **MEXICO**
 Status (Date) **RETURNED TO MISSION (08/14/2008)**
 Created By (Date) **MEDINAA (08/05/2008)**
 Modified Date **08/14/2008**

Edit Form

| VEHICLE REGISTRATION (MISSION) | | Registration Type | Mission Vehicle |
|---|--------------------------------|---|-----------------|
| Mission EMBASSY OF MEXICO ANNEX 0 WASHINGTON, DC 20006 | | | |
| Principal Driver | | | |
| I.D. Number | Name | Birth Date | |
| 4009-2145 | ESCAMILLA NUÑEZ, JESUS ENRIQUE | FEB/14/1962 | |
| Principal User | | | |
| I.D. Number | Name | Birth Date | |
| 4009-2145 | ESCAMILLA NUÑEZ, JESUS ENRIQUE | FEB/14/1962 | |
| Address Where Vehicle Is Principally Garaged 2000 PENNSYLVANIA AVENUE NW WASHINGTON, DC 20006 | | | |
| Ownership Type | Vehicle Identification Number | Make | Model |
| Owned | 1C3EJ46X3YN309253 | CHRY | CIRRUS |
| Body | Model Year | Weight (lbs) | Odometer (mi) |
| 4D | 2000 | 2975 | 51687 |
| | | | Vehicle Color |
| | | | GRY |
| Insurance Company | | Broker/Agent | |
| AMERICAN INTERNATIONAL SOUTH INSURANCE | | THE SUNRISE GROUP, LLC 816 EXECUTIVE DRIVE OVIEDO, FL 32765 (888) 760-9195 | |
| Binder or Policy Number | | Beginning Date (Mo/Day/Yr) | JUL/31/2008 |
| 0002309146 | | Ending Date (Mo/Day/Yr) | JUL/31/2009 |
| Insurance Coverage | | Personal Injury and Property Damage Per Accident | |
| Combined Single Limit | | \$1,000,000.00 | |

Please submit the following documents to accompany your application.

| Document | Condition |
|--|----------------------------|
| Certificate of Origin or Title | Document must be submitted |
| Photocopy of Insurance Binder Sheet OR Photocopy of Insurance Declaration Page | Document must be submitted |
| Odometer Statement | If Vehicle is New |

http://localhost:7001/eGov/app/viewReceipt.do?transID=5000045993

10/23/2008

Figure 6.1-9 – Confirmation Page for Vehicle Registration (Mission)



U.S. Department of State

Office of Foreign Missions

View Form # 5000000477 | [View All Forms](#) | [Main Menu](#) | [Logout](#)

Transaction ID **5000000477**
 Status (Date) **ACCEPTED (09/16/2004)**
 Created By (Date) **DIMARZIOE (09/16/2004)**
 Modified Date **09/16/2004**

Vehicle Registration

| | |
|-------------------------------|--|
| Mission | EMBASSY OF ITALY ANNEX 0 WASHINGTON, DC 20008 |
| Registration Type | Personal Vehicle |
| Owner I.D. Number | 4003-2303 |
| Owner Name | DAVIDSON, HARLEY |
| Owner Birth Date (Mo/Day/Yr) | JUL/01/1952 |
| Owner Address | 100 HARD TIMES VIEW HW WASHINGTON, DC 20009 |
| Co-Owner | None |
| Vehicle Identification Number | 1G1BH69H2FY121766 |
| Vehicle Make | CHEV |
| Vehicle Model | CCL |
| Vehicle Body | 4D |
| Vehicle Model Year | 1985 |
| Vehicle Weight (lbs) | 3389 |
| Vehicle Odometer (mi) | 0 |
| Vehicle Color | BLK |
| Ownership Type | Owned |
| Insurance Company Name | STATE FARM |
| Insurance Company Address | 1000 UNIVERSITY BLVD. SILVER SPRING, MD 20906 |
| Insurance Phone Number | (301) 555-1212 |
| Broker/Agent Name | STATE FARM |

| | |
|---|--|
| Broker/Agent Address | 1000 UNIVERSITY BLVD. SILVER SPRING, MD 20906 |
| Broker/Agent Phone Number | (301) 555-1212 |
| Binder or Policy Number | D9876543210 |
| Policy Beginning Date (Mo/Day/Yr) | OCT/01/2003 |
| Policy Ending Date (Mo/Day/Yr) | OCT/01/2004 |
| Insurance Coverage Type | Combined Single Limit |
| Personal Injury and Property Damage Per Accident | \$300,000.00 |

Please submit the following documents to accompany your application.

| Document | Condition |
|--|-------------------|
| Certificate of Origin or Title | |
| Photocopy of Insurance Binder Sheet OR Photocopy of Insurance Declaration Page | |
| Odometer Statement | If Vehicle is New |

After submitting these documents to the OFM, check back with the OFM eGov system to view the status of your application.

Remarks

No remarks on file

Add a remark

Add Remark

Figure 6.1-10 – Submission Receipt for Vehicle Registration (Mission)

6.2 - Applying for a Personal Vehicle Registration

The screenshot shows a Microsoft Internet Explorer browser window. The title bar reads "OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems". The address bar contains the URL "http://ofmsntsorw1:7010/webster/app/selectForm.do?selectedForm=DS100". The main content area features the U.S. Department of State seal on the left and the text "U.S. Department of State Office of Foreign Missions" in blue. Below this is a dark blue navigation bar with the text "Vehicle Registration | Page 1 of 4 | [Instructions](#)". The form itself has two sections: "* Mission" with a dropdown menu, and "* Registration Type" with two radio button options: "Mission Vehicle" and "Personal Vehicle". At the bottom of the form are two buttons: "Next >>" and "Cancel".

Figure 6.2-1 Vehicle Registration Screen 1

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmnsntorw1:7010/webster/app/vehicleReg1.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 1c of 4 | [Instructions](#)

Owner

* I.D. Number * Surname * Given Name

Date of Birth
 * Month * Day * Year

Owner Address

* No * Street * St/Rd * Quadrant * Unit Type * Unit No

* City * State * Zip Code

* Co-Owner
 None Diplomat Non-Diplomat

Figure 6.2-2 – Vehicle Registration Screen 1c

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmnsntorw1:7010/webster/app/vehicleReg1c.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 2 of 4 | [Instructions](#)

Vehicle

* Vehicle Identification Number * Make * Model

* Body * Year * Weight * Odometer * Color

* Ownership Type
 Lien
 Lease
 Owned

Figure 6.2-3 – Vehicle Registration Screen 2

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Search Favorites Media

Address http://ofmsntsorw1:7010/eGov/app/vehicleReg1.c.do

U.S. Department of State
Office of Foreign Missions

Vehicle Registration | Page 1d of 4 | [Instructions](#)

Co-Owner (Diplomat)

* I.D. Number * Surname (as it appears on Msa, if applicable) * Given Name (as it appears on Msa, if applicable)

Back << Next >> Cancel

Figure 6.2-2a – Co-Owner (Diplomat)

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Search Favorites Media

Address http://ofmsntsorw1:7010/eGov/app/vehicleReg1.c.do

U.S. Department of State
Office of Foreign Missions

Vehicle Registration | Page 1e of 4 | [Instructions](#)

Co-Owner (Non-Diplomat)

* Surname (as it appears on Msa, if applicable) * Given Name (as it appears on Msa, if applicable)

Back << Next >> Cancel

Figure 6.2-2b – Co-Owner (Non-Diplomat)

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg2.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 2a of 4 | [Instructions](#)

Lein or Lease Holder

* Name

* Address Line 1

Address Line 2

* City * State * Zip Code

Figure 6.2-4 – Vehicle Registration Screen 2a

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/vehicleReg2a.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 3 of 4 | [Instructions](#)

Insurance Carrier

* Company Name

* Address Line 1

Address Line 2

* City * State * Zip Code

* Phone Number

Figure 6.2-5 – Vehicle Registration Screen 3

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media

Address http://ofmsntsorw1:7010/webster/app/vehicleReg3.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 3a of 4 | [Instructions](#)

Insurance Broker/Agent

* Broker/Agent Name

* Address Line 1

Address Line 2

* City * State * Zip Code

* Phone Number

Figure 6.2-6 Vehicle Registration Screen 3a

OFM E-Gov: Vehicle Registration - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media

Address http://ofmsntsorw1:7010/webster/app/vehicleReg3a.do



U.S. Department of State Office of Foreign Missions

Vehicle Registration | Page 4 of 4 | [Instructions](#)

Insurance Policy

| | | |
|---|---|---|
| | Beginning Date | Expiration Date |
| * Binder or Policy Number <input type="text"/> | * Month <input type="text"/> * Day <input type="text"/> * Year <input type="text"/> | * Month <input type="text"/> * Day <input type="text"/> * Year <input type="text"/> |

* Insurance Coverage Type

P/A/P

| | | |
|---|---|---|
| Personal Injury Per Person \$ <input type="text"/> | Personal Injury Per Accident \$ <input type="text"/> | Personal Damage Per Accident \$ <input type="text"/> |
|---|---|---|

Combined Single Limit

Personal Injury and Property Damage Per Accident
\$

Figure 6.2-7 – Vehicle Registration Screen 4



U.S. Department of State

Office of Foreign Missions

View Form #5000030227 | View All Requested Services | Main Menu | Logoff

Transaction ID **5000030227**
 Country **MEXICO**
 Status (Date) **SUBMITTED (01/18/2008)**
 Created By (Date) **MEDINAA (01/18/2008)**
 Modified Date **01/18/2008**

| | | | |
|--|--|---|--|
| VEHICLE REGISTRATION (PERSONAL) | | Registration Type | Personal Vehicle |
| Mission EMBASSY OF MEXICO ANNEX 10 WASHINGTON, DC 20006 | | | |
| Owner I.D. Number 4010-2090 | Name CORDERO GOMEZ, JUAN ARTURO | Birth Date SEP/27/1957 | |
| Owner Address 728 RIDGEMONT AVENUE ROCKVILLE, MD 20850 | | Co-Owner None | |
| Ownership Type Owned | Vehicle Identification Number 2C8GP64L13R362011 | Make CHRY | Model T&C |
| Body SV | Model Year 2003 | Weight (lbs) 55000 | Odometer (mi) 55000 |
| Insurance Company TRAVELERS | | Broker/Agent WEAVER BROS 7315 WISCONSIN AVE STE. 900 EAST BETHESDA, MD 20814 (301) 664-7720 | |
| Binder or Policy Number 982217120 101 1 | | Beginning Date (Mo/Day/Yr) | NOV/28/2007 |
| | | Ending Date (Mo/Day/Yr) | NOV/28/2008 |
| Insurance Coverage PIA/P | Personal Injury Per Person \$100,000.00 | Personal Injury Per Accident \$300,000.00 | Personal Damage Per Accident \$100,000.00 |

Please submit the following documents to accompany your application.

| Document | Condition |
|--|----------------------------|
| Certificate of Origin or Title | Document must be submitted |
| Photocopy of insurance Binder Sheet OR Photocopy of insurance Declaration Page | Document must be submitted |
| Odometer Statement | If Vehicle Is New |

After submitting these documents to the OFM, check back with the OFM eGov system to view the status of your application.

http://localhost:7001/eGov/app/viewReceipt.do?transID=5000030227

10/23/2008

Figure 6.2-8 – Confirmation Page for Vehicle Registration (Personal)

6.3 - Applying for Title



U.S. Department of State Office of Foreign Missions

Application for Title | Page 1 of 3 | [Instructions](#)

* Mission
[Dropdown menu]

* Registration Type
 Mission Vehicle
 Personal Vehicle

Next >> Cancel

Figure 6.3-1 – Title Screen 1



U.S. Department of State Office of Foreign Missions

Application for Title | Page 1a of 3 | [Instructions](#)

Principal/Owner (Applicant must be a Principal even if not the vehicle owner or co-owner)

* I.D. Number * Surname (as it appears on 'Msa, if applicable) * Given Name (as it appears on 'Msa, if applicable)

[Text boxes]

Date of Birth
* Month * Day * Year
[Dropdown] [Text] [Text]

Residence Address
* No * Street * St/Rd Quadrant Unit Type Unit No
[Text] [Text] [Dropdown] [Dropdown] [Dropdown] [Text]

* City * State * Zip Code
[Text] [Text] [Text]

If the co-owner does not have a PID, then this application must be submitted manually, not via e-Gov.
Vehicle Co-Owner

None Principal Dependent

I.D. Number Surname (as it appears on 'Msa, if applicable) Given Name (as it appears on 'Msa, if applicable)

[Text boxes]

Date of Birth
Month Day Year
[Dropdown] [Text] [Text]

Back << Next >> Cancel

Figure 6.3-2 – Title Screen 1a



U.S. Department of State Office of Foreign Missions

Application for Title | Page 2 of 3 | [Instructions](#)

Application for title may not be submitted for imported motor vehicles that do not conform to U.S. Department of Transportation (DOT) and Environmental Protection Agency (EPA) safety and emission standards. If the vehicle you wish to apply for title is not in the vehicle Make pop-up window, then you must apply for title manually, not via e-Gov.

| | | | | |
|---------------------------------|----------------------|----------------------|----------------------|----------------------|
| * Vehicle Identification Number | * Make | * Model | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | |
| Body | Year | Weight (lbs) | * Odometer (mi) | Color |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |

Figure 6.3-3 – Title Screen 2



U.S. Department of State Office of Foreign Missions

Application for Title | Page 3 of 3 | [Instructions](#)

* Title Type:

- Sell (outside the diplomatic community)
- Export
- Transfer to Another Diplomat/Employee
- Transfer to Mission
- Junk
- Lease
- Salvage
- Stolen

Figure 6.3-4 – Title Screen 3



U.S. Department of State

Office of Foreign Missions

Application for Title | Page 3a of 3 | [Instructions](#)

The buyer cannot be a member of the foreign diplomatic community or an active dependent. If the buyer is a member of the foreign diplomatic community, then go back and select Transfer to Another Diplomat/Employee.

Buyer

| | |
|----------------------|----------------------|
| * Surname | * Given Name |
| <input type="text"/> | <input type="text"/> |

Address

| | | | | | |
|----------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| * No | * Street | * St/Rd | Quadrant | Unit Type | Unit No |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| * City | * State | * Zip Code | | | |
| <input type="text"/> | <input type="text"/> | <input type="text"/> | | | |

Figure 6.3-5 – Title Screen 3a



U.S. Department of State

Office of Foreign Missions

[Application for Title](#) | [Confirmation Page](#) | [Instructions](#)

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the form.

Sale or transfer titles to an individual or mission should not have a lien. If the vehicle has a lien, then a sale or transfer title to an individual or mission will not be processed. The lien must be satisfied before this title will be processed.

APPLICATION FOR TITLE

| | | | | |
|---|------------|--|---|-------|
| DS102 | | Registration Type Mission Vehicle | Title Purpose Sell (outside the diplomatic community) | |
| Mission EMBASSY OF PHILIPPINES ANNEX 0 WASHINGTON, DC 20036 | | | | |
| Vehicle Identification Number | | Make | | Model |
| Body | Model Year | Weight (lbs) | Odometer (mi) | Color |
| Buyer Name TEST, TEST | | Buyer Address 1 S AVENUE A, VA 22201 | | |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 U.S. Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

The official (diplomatic, consul, staff) federal license plates issued for this vehicle will not be removed from the vehicle until authorized by the U.S. Department of State, Office of Foreign Missions and the official federal license plates will be returned to the Office of Foreign Missions.

Figure 6.3-6 – Confirmation Page for Title



U.S. Department of State

Office of Foreign Missions

View Form #5000031991 | View All Requested Services | Main Menu | Logoff

Transaction ID: **5000031991**
 Country: **CANADA**
 Status (Date): **SUBMITTED (02/19/2008)**
 Created By (Date): **OLIVEROSMD (02/19/2008)**
 Modified Date: **02/19/2008**

| | | |
|--|--|---|
| TITLE | Registration Type Personal Vehicle | Title Purpose Sell (outside the diplomatic community) |
| Mission EMBASSY OF CANADA ANNEX 0 WASHINGTON, DC 20001 | | |
| Owner | | |
| I.D. Number 4007-8532 | Name BROWNRIGG, JIM | Birth Date MAY/05/1964 |
| Residence Address 9501 FALLS BRIDGE LANE POTOMAC, MD 20854 | | |
| Co-owner | | |
| I.D. Number | Name None | Birth Date |
| Vehicle Identification Number 4T3ZF19C23U533041 | | |
| Body SV | Model Year 2003 | Weight (lbs) |
| | | Make TOYT |
| | | Model SIE |
| | | Odometer (mi) 117486 |
| | | Color GRY |
| Buyer Name COLEMAN, JIM | | Buyer Address 10400 AUTO PARK AVENUE BETHESDA, MD 20817 |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 U.S. Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

The official (diplomatic, consul, staff) federal license plates issued for this vehicle will not be removed from the vehicle until authorized by the U.S. Department of State, Office of Foreign Missions and the official federal license plates will be returned to the Office of Foreign Missions.

| | |
|--|-------------------------|
| Owner's Signature (Required) Date | Mission Seal (Required) |
| Co-owner's Signature Date | |

Please submit the following documents to accompany your application.

| Document | Condition |
|---------------------|---|
| Lien Release Letter | If the lien has been satisfied, then evidence must be submitted. |
| OR | If the lien exists and is previously recorded with a lien title, then this document must be submitted. Lien title must be the original Department of State lien title properly stamped and signed by the lending institution or the original lien letter on the financial institution's letterhead identifying the vehicle by VIN, the customer's name and signed by an officer of the bank or lending institution. |
| Lien Title | |
| | If the lien has not been satisfied, then the disposition title will be printed with the lien information and stamped "LIEN NOT SATISFIED". |
| Odometer Statement | If there is an odometer discrepancy, then additional proof of the current odometer reading is also required. |

Figure 6.3-7 – Submission Receipt for Application for Title

6.4 - Applying for Replacement Plates

OFM E-Gov: Application for Replacement Plates - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Search Favorites Media

Address: https://169.253.2.36/eGov/app/selectForm.do?selectedForm=D5104

Google PageRank 567 blocked Check AutoLink AutoFill Options

 **U.S. Department of State**
Office of Foreign Missions

Application for Replacement Plates | Page 1 of 4 | [Instructions](#)

* Mission
[Dropdown Menu]

* Reason for New Plates
 1 Plate Lost/Stolen 2 Plates Lost/Stolen
 Change in Position Other (e.g., damaged plates or lost/stolen stickers)

* Vehicle Registration Type
 Mission Vehicle
 Personal Vehicle

Next >> Cancel

Figure 6.4-1 – Replacement Plates Screen 1

OFM E-Gov: Application for Replacement Plates - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Search Favorites Media

Address: http://ofmnsntorw1:7010/webster/app/replacementPlates1.do

 **U.S. Department of State**
Office of Foreign Missions

Application for Replacement Plates | Page 1a of 2 | [Instructions](#)

Date Plates Lost/Stolen
* Month * Day * Year
[Dropdown] [Input] [Input]

* OFM Report Number
[Input]

Back << Next >> Cancel

Figure 6.4-2 – Replacement Plates Screen 1a



Figure 6.4-3 – Replacement Plates Screen 2



Figure 6.4-4 – Replacement Plates Screen 3

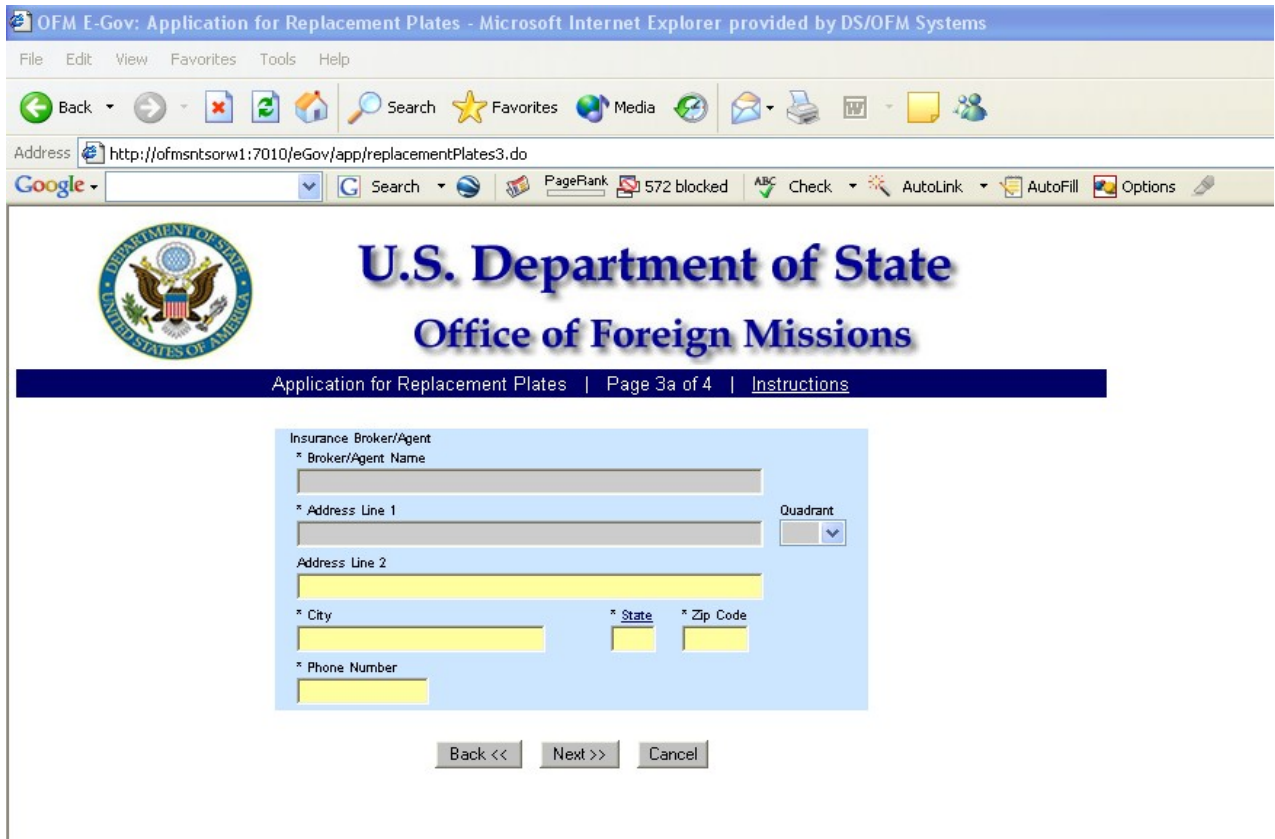


Figure 6.4-5 – Replacement Plates Screen 4



Figure 6.4-6 – Replacement Plates Screen 5


OFM E-Gov: Application for Replacement Plates - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/eGov/app/replacementPlates4.do

Google Search PageRank 572 blocked Check Look for Map AutoFill Options



U.S. Department of State Office of Foreign Missions

Application for Replacement Plates | Confirmation Page | Instructions

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the form.

APPLICATION FOR REPLACEMENT PLATES

| | | | | | |
|---|--|--|--|---------------------------|--|
| DS104 | | Vehicle Registration Type | | Personal Vehicle | |
| Mission EMBASSY OF ALBANIA ANNEX 0 WASHINGTON, DC 20008 | | | | | |
| Reason for Replacement Plates Other (e.g., damaged plates or lost/stolen stickers) Other Reason PJ | | | | | |
| Owner | | Name | | Birth Date | |
| I.D. Number 1234-5671 | | T, T | | JAN/01/1980 | |
| Co-owner | | Name | | Birth Date | |
| I.D. Number | | None | | | |
| Vehicle Identification Number 1000000000000000 | | License Plate Number A | | Make 1 | |
| Body 1 | | Model Year 1 | | Odometer (mi) 1 | |
| Insurance Company T | | Broker/Agent TEST TEST TEST, VA 22201 (703) 243-4976 | | | |
| Binder or Policy Number 1 | | Beginning Date (Mo/Day/Yr) | | FEB/01/2006 | |
| | | Ending Date (Mo/Day/Yr) | | DEC/02/2006 | |
| Insurance Coverage Combined Single Limit | | Personal Injury and Property Damage Per Accident \$3,000,000.00 | | | |

Figure 6.4-6 – Confirmation Page for Replacement Plates

OFM E-Gov: Application for Replacement Plates - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/eGov/app/replacementPlates1.do

Google Search PageRank 572 blocked Check AutoLink AutoFill Options



U.S. Department of State Office of Foreign Missions

Application for Replacement Plates | Page 1b of 4 | Instructions

* New Position

Diplomatic Agent

Career Consular Officer

Administrative and Technical Staff

Service Staff

Figure 6.4-7 – Replacement Plates Screen 1b



Figure 6.4-8 – Replacement Plates Screen 1c

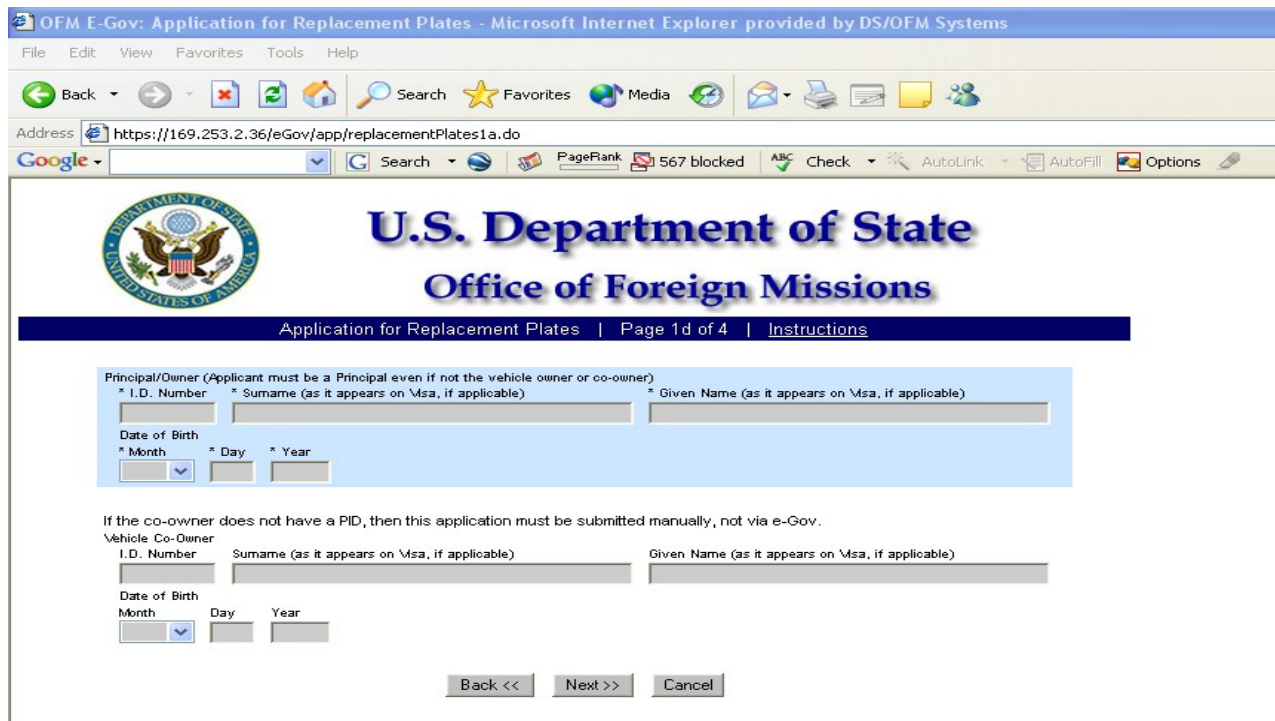


Figure 6.4-9 – Replacement Plates Screen 1d


6.5 - Applying for Driver License or Non-Driver ID

OFM E-Gov: Application for Driver License or Non-Driver ID - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

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Address: http://ofmsntsorw1:7010/webster/app/selectForm.do?selectedForm=D51972D

 **U.S. Department of State**
Office of Foreign Missions

Application for Driver License or Non-Driver ID | Page 1 of 3 | [Instructions](#)

* License Type
 Driver License
 Non-Driver ID

* Issue Type
 Original
 Replacement
 Renewal

Next >> Cancel

Figure 6.5-1 – Driver License/Non-Driver ID Screen 1

OFM E-Gov: Application for Driver License or Non-Driver ID - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address: http://ofmsntsorw1:7010/webster/app/driversLicense1.do

 **U.S. Department of State**
Office of Foreign Missions

Application for Driver License or Non-Driver ID | Page 2 of 3 | [Instructions](#)

* Mission
[Dropdown]

Applicant

* I.D. Number [Text] * Surname [Text] * Given Name [Text]

Date of Birth * Month [Dropdown] * Day [Text] * Year [Text] Height * Feet [Text] * Inches [Text] * Weight [Text] lbs

Applicant Address

* No [Text] * Street [Text] * St/Rd [Dropdown] Quadrant [Dropdown] Unit Type [Dropdown] Unit No [Text]

* City [Text] * State [Text] * Zip Code [Text]

Back << Next >> Cancel

Figure 6.5-2 - Driver License/Non-Driver ID Screen 2

OFM E-Gov: Application for Driver License or Non-Driver ID - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/driversLicense2.do



U.S. Department of State Office of Foreign Missions

Application for Driver License or Non-Driver ID | Page 3 of 3 | [Instructions](#)

* Vehicle Class

Regular

Motorcycle

Regular and Motorcycle

* Please answer each of the questions below.

Do you wear corrective lenses? Yes No

Do you have any physical disability, other than vision, which may affect your driving? Yes No

Do you possess a valid non-U.S. driver license? Yes No

Do you possess a valid U.S. driver license? Yes No

Has your U.S. license or privilege to operate a motor vehicle been suspended, revoked, cancelled, or refused by any state or by any jurisdiction within the United States? Yes No

Figure 6.5-3 - Driver License/Non-Driver ID Screen 3

OFM E-Gov: Application for Driver License or Non-Driver ID - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Media Print Mail

Address http://ofmsntsorw1:7010/webster/app/driversLicense3.do



U.S. Department of State Office of Foreign Missions

Application for Driver License or Non-Driver ID | Page 3a of 3 | [Instructions](#)

You have indicated that you possess a valid non-U.S. driver license. Please enter the details of the license below.

* Country of License

* Are you a citizen of the above country?

Yes No

Expiration Date

* Month * Day * Year

* License #

Figure 6.5-4 – Driver License/Non-Driver ID Screen 3a

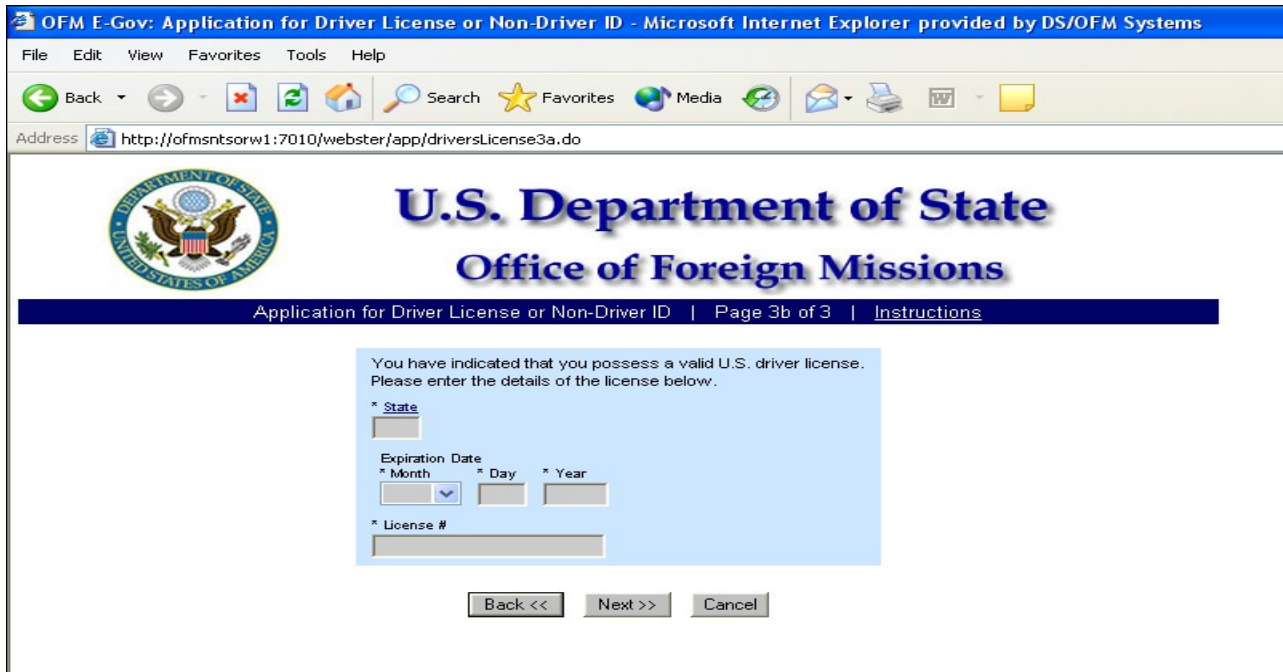


Figure 6.5-5 – Driver License/Non-Driver ID Screen 3b



Figure 6.5-6 – Driver License/Non-Driver ID Screen 3c

OFM E-Gov: Application for Driver License or Non-Driver ID - Microsoft Internet Explorer provided by DS/OF...

File Edit View Favorites Tools Help

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Address <http://192.168.1.96:7010/eGov/app/driversLicense3.do> Go Links



U.S. Department of State Office of Foreign Missions

Application for Driver License or Non-Driver ID | [Confirmation Page](#) | [Instructions](#)

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the form.

APPLICATION FOR DRIVER LICENSE/Non-Driver ID

| | | |
|--|---------------------------------------|-------------------------------|
| DS1972D | License Type Driver License | Issue Type Original |
| Mission CONSULATE OF ATLANTIS ANNEX 0 CHICAGO, IL 60612 | | |
| I.D. Number 1236-5478 | Name TEST, TEST | |
| Address 100 MAIN STREET NW WASHINGTON, DC 20008 | Birth Date JAN/01/1980 | Height 5' 8" |
| | Weight (lbs) 165 | |
| Vehicle Class | Regular (Car) | |
| Do you wear corrective lenses for driving? | No | |
| Do you have any physical disability, other than vision, which may affect your driving? | No | |
| Do you possess a valid non-U.S. driver license? | No | |
| Do you possess a valid U.S. driver license? | No | |
| Has your U.S. license or privilege to operate a motor vehicle been suspended, revoked, cancelled, or refused by any state or by any jurisdiction within the United States? | No | |

Figure 6.5-7 – Confirmation Page for Driver License

OFM E-Gov: View Submission Receipt - Microsoft Internet Explorer provided by DS/OFM Systems

File Edit View Favorites Tools Help

Back Forward Stop Refresh Home Search Favorites

Address http://192.168.1.96:7010/eGov/app/viewReceipt.do?transID=5000002669 Go Links

Country **ATLANTIS**
 Status (Date) **SUBMITTED (10/30/2007)**
 Created By (Date) **MATAKACT (10/30/2007)**
 Modified Date

APPLICATION FOR DRIVER LICENSE/Non-Driver ID

| | | |
|--|---------------------------------------|-------------------------------|
| DS1972D | License Type Driver License | Issue Type Original |
| Mission CONSULATE OF ATLANTIS ANNEX 0 CHICAGO, IL 60612 | | |
| I.D. Number 1236-5478 | Name TEST, TEST | |
| Address 100 MAIN STREET NW WASHINGTON, DC 20008 | Birth Date JAN/01/1980 | Height 5' 8" |
| | | Weight (lbs) 165 |
| Vehicle Class Regular (Car) | | |
| Do you wear corrective lenses for driving? | | No |
| Do you have any physical disability, other than vision, which may affect your driving? | | No |
| Do you possess a valid non-U.S. driver license? | | No |
| Do you possess a valid U.S. driver license? | | No |
| Has your U.S. license or privilege to operate a motor vehicle been suspended, revoked, cancelled, or refused by any state or by any jurisdiction within the United States? | | |
| Please submit the following documents to accompany your application. | | |
| Document | Condition | |
| Photographs (2), facial view, 1.5" x 1.5" <i>Do not staple on face</i> | Document must be submitted | |
| Driver License Test Form filled out at a local DMV | Document must be submitted | |
| Photograph and Signature Card | Document must be submitted | |

Done Internet

Click this link to open and print your Driver License Test Form.

See Figure 6.5-9 – Driver License Test Form.

Figure 6.5-8 – Submission Receipt for Driver License



U.S. Department of State

Office of Foreign Missions

View Form #5000029364 | View All Requested Services | Main Menu | Logoff

Transaction ID **5000029364**
 Country **CANADA**
 Status (Date) **SUBMITTED (01/04/2008)**
 Created By (Date) **RAMSAYWHITEB (01/04/2008)**
 Modified Date

| | | | | |
|--|---------------------------------|---------------------------------------|----------------------------------|----------------------------|
| DRIVER LICENSE/Non-Driver ID | | License Type Driver License | Issue Type Replacement | |
| Mission (/sro/app/viewFormDS1872D_content.jsp) EMBASSY OF CANADA ANNEX 0 WASHINGTON, DC 20001 | | | | |
| I.D. Number 4006-2963 | Name POWELL, JONATHAN | | | |
| Address 980 BRAMLEIGH LANE ANNAPOLIS, MD 21401 | | Birth Date JUL07/1960 | Height 5' 6" | Weight (lbs) 175 |
| Vehicle Class | | Regular and Motorcycle | | |
| Do you wear corrective lenses for driving? | | | | No |
| Do you have any physical disability, other than vision, which may affect your driving? | | | | No |
| Do you possess a valid non-U.S. driver license? | | | | No |
| Do you possess a valid U.S. driver license? | | | | Yes |
| State of License United States | | Expiration Date Sep/30/2010 | License # 40062963 | |
| Has your U.S. license or privilege to operate a motor vehicle been suspended, revoked, cancelled, or refused by any state or by any jurisdiction within the United States? | | | | No |

Please submit the following documents to accompany your application.

| Document | Condition |
|--|---|
| Photograph and Signature Card | Document must be submitted |
| Mission letter or police report | If replacement is due to lost or stolen license |
| Form DS-2006 OR photocopy of current license | If replacement is due to address change |

After submitting these documents to the OFM, check back with this application in a couple of days to view the status of your application.



United States Department of State
DRIVER LICENSE SUPPLEMENTAL FORM

Driver License
PID:
Country:
Transaction ID:

**This space is reserved for certifying Motor
 Vehicle Authority Use Only**

Test Results

Vision Test Results:

| | |
|--------------------------------------|---|
| Left 20/ | |
| Right 20/ | |
| Both 20/ | |
| Peripheral Vision | |
| <input type="checkbox"/> With Lenses | <input type="checkbox"/> Without Lenses |

Written/Legal Test: Car Motorcycle

| | | |
|---------------|--|--|
| Passing Score | | |
| Passing Date | | |

Road/Skills Test: Car Motorcycle

| | | |
|---------------|--|--|
| Passing Score | | |
| Passing Date | | |

Examiner Signature and Date:

| |
|-------------------|
| Signature: |
| Date: |
| Telephone Number: |
| City: |
| County: |
| State: |

MVA Stamp Here:

Personal Information:

SFDG, ASDF
 102 EYE BOULEVARD
 WASHINGTON, DC 20008
 PID: 1000-9999 DOB: 01/02/1951
 Height: 5' 10" Weight: 220 lbs
 License Type: Original

Vehicle Class:

| |
|---|
| <input checked="" type="checkbox"/> C - Regular License |
| <input checked="" type="checkbox"/> M - Motorcycle |
| <input type="checkbox"/> A - Commercial |

Testing Requirement(s):

| |
|---|
| <input checked="" type="checkbox"/> Vision |
| <input type="checkbox"/> Written/Legal/Law Test |
| <input type="checkbox"/> Road/Skills Test |

Attach photo(s) here:

Signature:

Figure 6.5-9 – Driver License Test Form

****This form must be taken to the local DMV for certification of tests.****