

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](#)

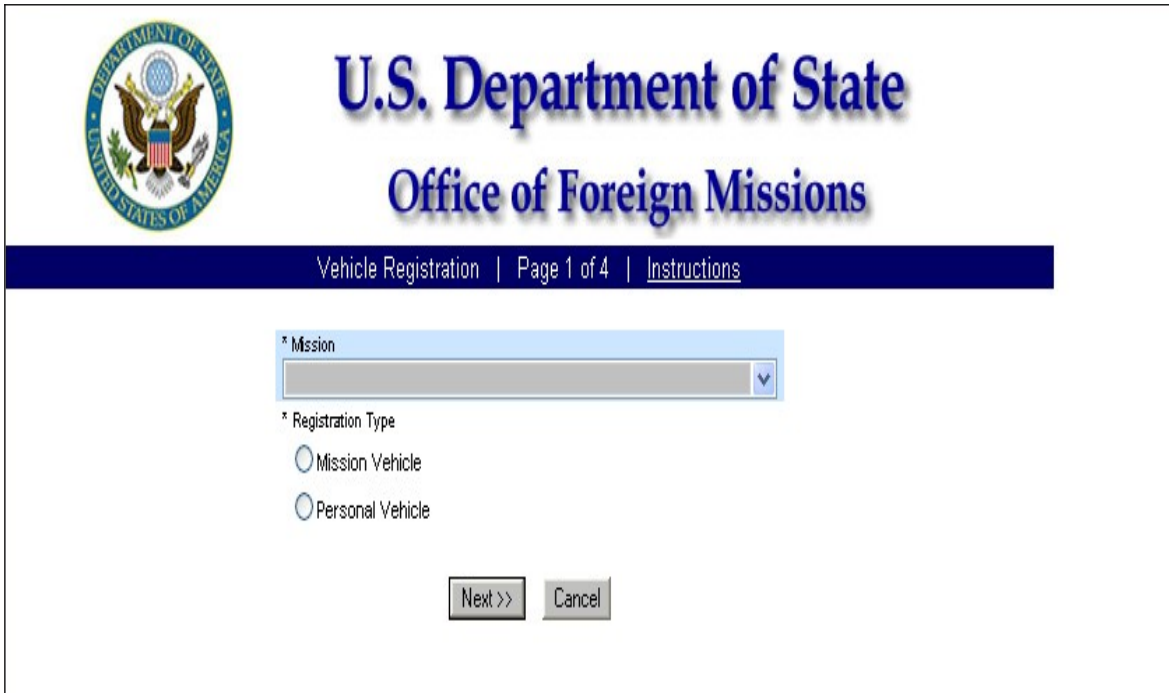
Request a Service from the list below to begin.


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

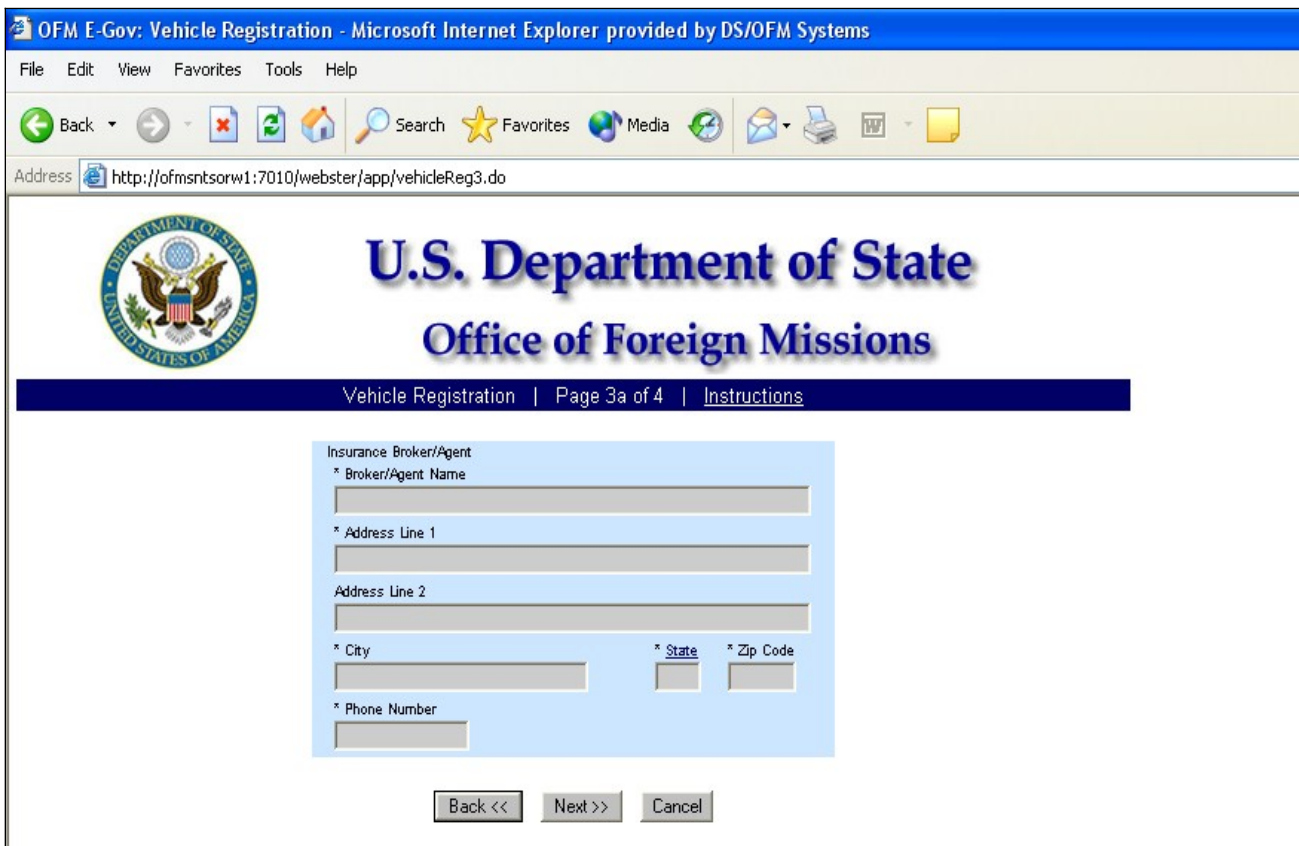


Figure 6.1-7 – Vehicle Registration Screen 3a

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://ofmnsorw1:7010/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://ofmnsorw1:7010/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 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 2a of 4 | [Instructions](#)

Lien 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 Home Search Favorites Media Refresh 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 Forward Stop Home Search Favorites Media Refresh Print Mail Options

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

Google Search PageRank 567 blocked Check AutoLink AutoFill Options

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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 Forward Stop Home Search Favorites Media Refresh Print Mail Options

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] [Text] [Text]

* OFM Report Number
[Text]

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

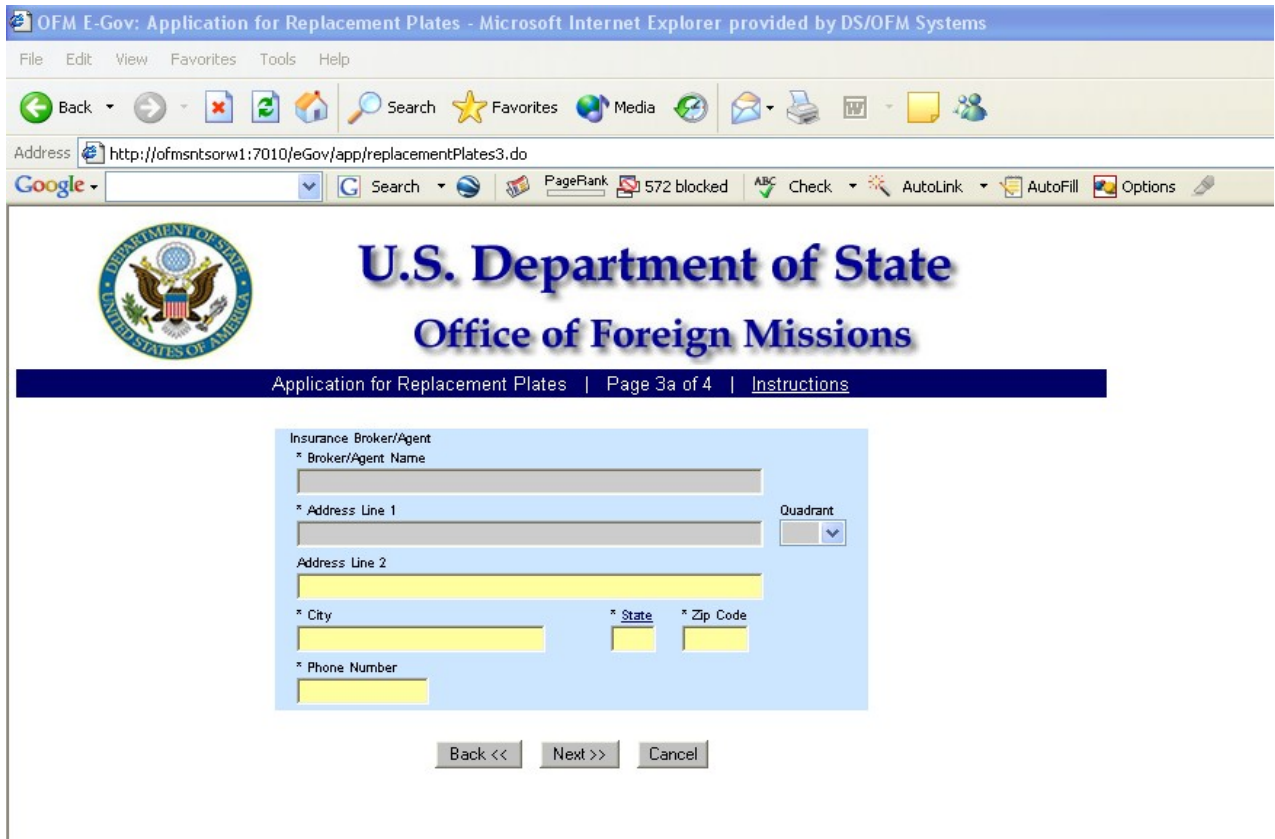


Figure 6.4-5 – Replacement Plates Screen 4



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					JAH/01/1980
1234-5671	T, T				
Co-owner		Name		Birth Date	
I.D. Number					
		None			
Vehicle Identification Number		License Plate Number		Make	
1000000000000000		A			
Body	Model Year		Odometer (mi)		Color
			1		BLK
Insurance Company			Broker/Agent		
T			TEST TEST TEST, VA 22201 (703) 243-4976		
Binder or Policy Number			Beginning Date (Mo/Day/Yr)		FEB/01/2006
1			Ending Date (Mo/Day/Yr)		DEC/02/2006
Insurance Coverage			Personal Injury and Property Damage Per Accident		
Combined Single Limit			\$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

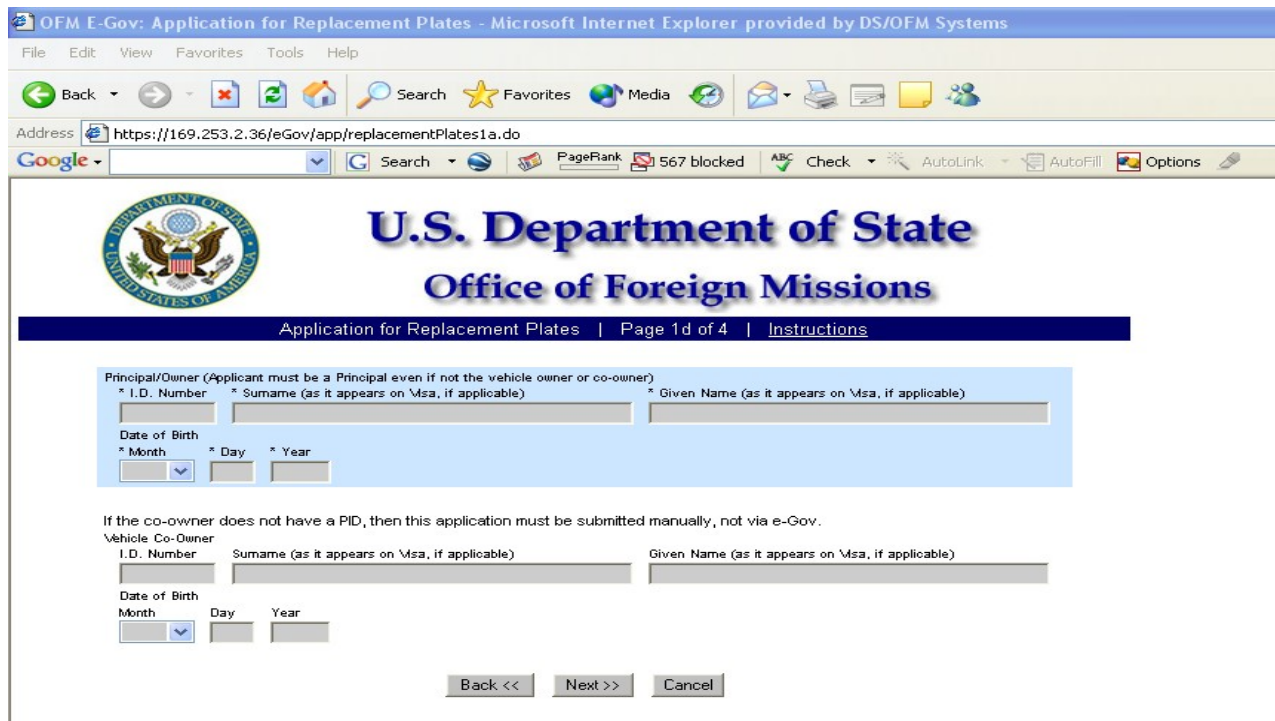



Figure 6.4-9 – Replacement Plates Screen 1d

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

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

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

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]

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

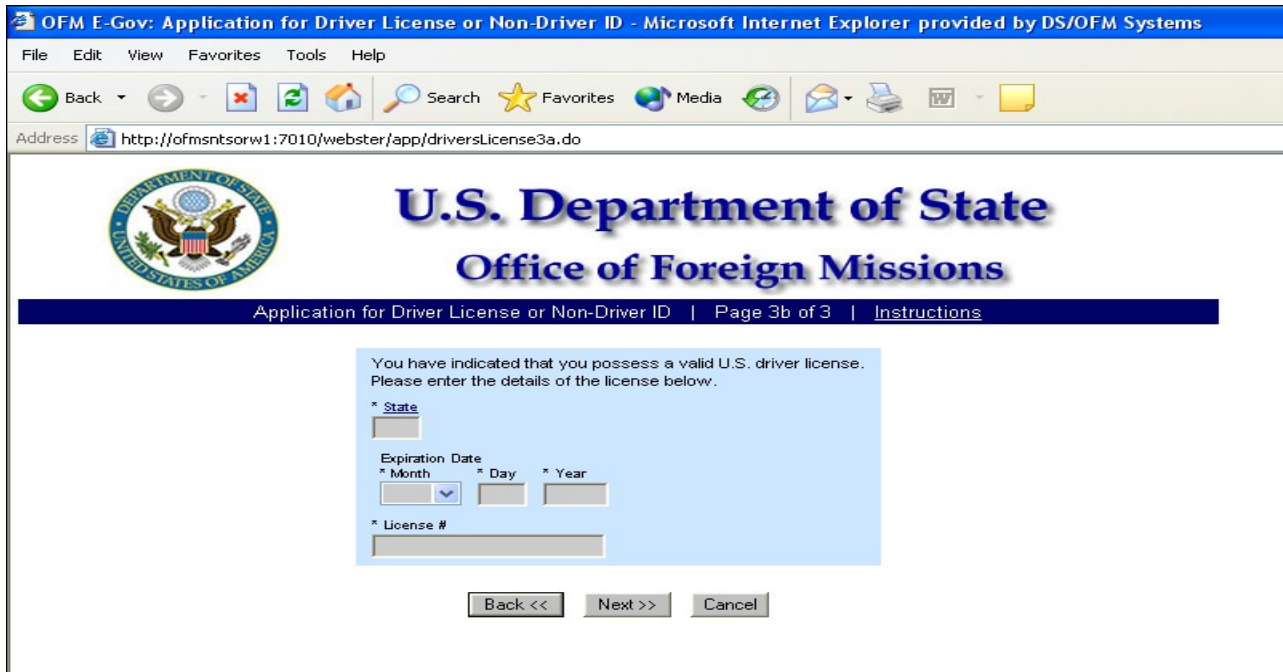


Figure 6.5-5 – Driver License/Non-Driver ID Screen 3b



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

Back Forward Stop Home Search Favorites Refresh Print Mail News RSS

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

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.****