



UNIVERSITY OF CALIFORNIA, MERCED  
5200 NORTH LAKE ROAD  
MERCED, CALIFORNIA 95343  
(209) 228-8277

## DMV PULL NOTICE FORM

Please Attach A Photocopy of Driver's License to this Form

Today's Date: \_\_\_\_\_ \*First Desired Reservation Date: \_\_\_\_\_

Department Name: \_\_\_\_\_

Department Contact: \_\_\_\_\_ Department Contact Number: \_\_\_\_\_

### Driver's Contact Info:

Undergrad. Student     Graduate Student     Faculty     Staff

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  Photocopy of Driver's License (Required)

E-mail Completed Form to: [taps@ucmerced.edu](mailto:taps@ucmerced.edu) or Deliver to TAPS Office in Facilities A

*\*Please expect a 2 week wait for DMV processing\**