



John J. Barthelmes  
Commissioner of Safety

# State of New Hampshire

Department of Safety  
Division of Motor Vehicles  
23 Hazen Drive, Concord, NH 03305  
(603) 227-4000

Richard C. Bailey, Jr.  
Director of Motor Vehicles

Dear CDL Holder,

Our records indicate that you hold a New Hampshire commercial drivers license. Due to new federal regulation by the U.S. Department of Transportation, your CDL is being impacted.

The Federal Motor Carrier Administration now requires that all CDL holders or those applying for a CDL must meet federal physical requirements and provide their medical card to the Division of Motor Vehicles. All state driver licensing agencies are required to report and track medical cards.

If your CDL is up for renewal this year, please renew as you normally would and bring your medical card with you. If your license is not up for renewal this year, please use one of the following three (3) methods to supply the DMV with a copy of your medical card. Please keep in mind, all CDL holders will need to comply on or before January 30<sup>th</sup> 2014 or risk losing your CDL privileges.

1. In person, you can go into any of our substations and fill out the form (DSMV 312), present the medical card and we can scan them into our system.
2. Mail in, please answer the questions on the back of this page and send in a photo copy of your license and medical card (we must have all 3).

NH-DMV  
DRIVER LICENSING BUREAU  
23 HAZEN DRIVE  
CONCORD, NH 03305

3. E-mail the new form filled out and a scanned copy of the DRIVER LICENSE and MEDICAL CARD in PDF form (we must have all 3).

[NHCDLMEDCARDS@dos.nh.gov](mailto:NHCDLMEDCARDS@dos.nh.gov)

**Please read the following questions and answer YES or NO accordingly:**

- **Interstate non-excepted:** You are an Interstate non-excepted driver and must meet the Federal DOT medical card requirements (e.g. – you are “not excepted”).  YES  NO
- **Interstate excepted:** You are an Interstate excepted driver and do not have to meet the Federal DOT medical card requirements.  YES  NO
- **Intrastate non-excepted:** You are an Intrastate non-excepted driver are required to meet the medical requirements for your State.  YES  No
- **Intrastate excepted:** You are an Intrastate excepted driver and do not have to meet the medical requirements for you State.  YES  NO

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Please attach a photocopy of your driver license and current medical card in space provided below.**