



DRIVER'S LICENCE LETTER OF CONFIRMATION/EXPERIENCE REQUEST

DRIVER INFORMATION

Last name _____ First name _____ Initial _____

Date of birth YYYY/MM/DD

Yukon driver's licence no. (if known) _____ Approximate year last licenced _____

DELIVERY INSTRUCTIONS

Licensing agency requesting letter of confirmation:

Province/Territory _____ Agency phone no. _____ (000) 000-0000 Agency fax no. _____ (000) 000-0000

Agency email _____

Yukon Motor Vehicles will only provide the above letter of confirmation/experience to a provincial/territorial motor vehicle agency.

Driver signature _____ Date: YYYY/MM/DD

Phone number _____ (000) 000-0000

Yukon Motor Vehicles cannot guarantee the confidentiality of an email response. Email is not considered a secure method of communication and personal information could potentially be read by an unauthorized person or persons. Emails sent to and from work computers could potentially be read by an employer and emails sent to a home address may be read by anyone with access to that home computer such as other members of the household. Generally, email is not encrypted and could be intercepted by any of the internet service providers that handle the emails from the sender to the recipient.

Email request to:

Fully completed and signed forms can be scanned and emailed to motor.vehicles@gov.yk.ca

Mail request to:

Yukon Motor Vehicles
Box 2703 W-22
Whitehorse, Yukon Y1A2C6

Fax request to:

867-393-6220
Yukon Motor Vehicles