



Invisible Condition Removal Form

Utah Driver License Division

P.O. Box 144501

SLC, UT 84114-4501

Phone: 801-963-7325 Fax: 801-957-8698 Email:dlmedical@utah.gov

First Name

Last Name

Date of Birth

Driver License/Identification Card Number

I request the Driver License Division remove the invisible condition identification symbol from my record in accordance with UCA §53-3-207.

I understand that within 30 days the division will remove the invisible condition(s) from the record and update the UCJIS law enforcement database.

Applicant's Signature

Date