Choose one of the following three ways to submit your Next of Kin information:

In person

Visit any of the four DMV locations.

Online

- Visit www.dmv.de.gov
- Select "Online Services"
- Select "Next of Kin/Emergency Contact Enrollment"

By Mail

Complete, seal, and mail this form. Address is provided on brochure. Please be sure to add postage for delivery.

Once your Next of Kin information is on file, you may change or remove it using any of the above methods.



PLACE STAMP HERE



Division of Motor Vehicles

Dover, DE 19903-0698 Help Desk P.O. Box 698



Emergency Contact Information

Through the Next of Kin Emergency Contact Information Program, Delawareans can identify the person they choose to be notified in the event they are involved in an accident or emergency leaving them incapacitated or unable to communicate with law enforcement or emergency medical responders.





About the Program

The Next of Kin program allows anyone with a Delaware driver license or identification card the option of adding emergency contact information to their license/ID record.

- It's free! There is no fee to add contact information to your driver license/permit/ID record.
- Contact information will be stored in a secure database which holds drivers license/ID information, accessible only by the Division of Motor Vehicles and law enforcement.
- For anyone age 18 and older, the contact person can be a relative, friend or co-worker.
- Those under age 18 are required to have a parent or legal guardian as their primary contact.



Yes, I would like the Organ Donor designation printed on my driver license or photo ID.

There is no fee to place the Organ Donor designation on your drivers license or photo ID. Your driving record will reflect your new Organ Donor status. Upon renewal of your driver license or photo ID, a red heart will appear next to your photo. This is considered legal consent for organ and tissue donation. It is important for you to inform your family of your decision to be an organ and tissue donor.



Information Form

□ Add	\square Change	\square Remove
Yes, I want to add Next of Kin/Emergency Contact Information to my Delaware Oriver License or Identification Card ecord.	Please change the Next of Kin/Emergency Contact Information on my Delaware Driver License or Identification Card record to the information listed below.	Please remove the Next of Kin/Emergency Contact Information listed on my Delaware Driver License or Identification Card record. (If selected, skip Section 2)
Section 1: Delaware Driver	License/Identification Card Ho	lder Information (Required)
ast Name/First Name/M.I.:		
Street Address:		
City/State/Zip:		
	tion Card #:	
Contact 1 (Required)	rgency Contact Information (At)	east one pnone number or address is required.)
·	Rela	*i anghin
		'
	Cell:	vvork:
Street Address:	_ State:	7:0.
olty	_ State	Ζιρ
Contact 2 (Optional)		
	Rela	tionship:
.ast Name/First Name/M.I.:		
	Cell:	Work:
Home Phone:	Cell:	
Home Phone:		
Home Phone:		
Home Phone: Street Address: City:		Zip:

NOTE: The information provided on this form will overwrite any existing data in the Next of Kin/Emergency Contact fields on your records. Failure to complete this form in its entirety will result in no information being updated on your records. Please ensure that the information provided is up to date and accurate; the Division of Motor Vehicles is not responsible for any errors in the information provided. In the event of an emergency, this contact information may be disclosed to emergency personnel. The Delaware Division of Motor Vehicles will not be held liable if the designated person(s) listed cannot be contacted in the event of an emergency.