Physical Address: 1801 N. Lincoln Blvd.
Oklahoma City, OK 73105

Mailing Address: ODWC
P.O. Box 53465
Oklahoma City, OK 73152
(405) 521-3852

RESIDENT 5-YEAR LICENSE APPLICATION

___ FISHING $88.00 **___ HUNTING $88.00** **_____ COMBINATION $148.00**

Resident 5-Year Licenses are available to legal residents of Oklahoma. To prove residency, please provide a copy of your Oklahoma Driver's License or Oklahoma State ID. Residency status is determined by the state of which you hold your Driver's License or State ID. Those with out of state Driver's License or State ID's do not qualify for the Resident 5-Year License. Your Oklahoma Driver's License or Identification Card must have been issued at least 60 days ago if an Original or state that it is a Renewal or Replacement. 5-Year licenses are available online, by mail, or in person at ODWC headquarters in Oklahoma City. For mail-in orders, please allow up to four weeks for processing. License may be purchased with a money order, cashier's check, credit card, or personal check.
NOTE: This license is valid 5 years from date of issue, and includes hunting and/or fishing license. No other licenses, such as deer or turkey, are included with this license.

FULL LEGAL NAME_____
Last Name **First Name** **Middle Name**

MAILING ADDRESS _____

CITY _____STATE _____ ZIP CODE _____ COUNTY_____

PHYSICAL ADDRESS (if different than above) _____

CITY _____STATE _____ ZIP CODE _____ COUNTY_____

LAST 4 of SOCIAL SECURITY (REQUIRED) _____ DATE OF BIRTH (MM/DD/YY) _____/_____/_____

HUNTER ED NUMBER_____DATE OF COMPLETION (MM/DD/YY)_____/_____/_____

YEARS AT CURRENT ADDRESS _____ MILITARY VETERAN (Check One) _____ YES _____ NO

DRIVER'S LICENSE NUMBER _____STATE _____ EXP. DATE _____ ISS. DATE_____

TELEPHONE NUMBER (_____) _____ EMAIL ADDRESS_____

X_____ **X_____**
Signature of Applicant or Preparer / Date **Signature of Authorized Department Employee / ID # / Date**

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To charge this purchase to your Visa or MasterCard, complete the section below:
Card Number: _____-_____-_____-_____ Exp. Date: ____/____
Card Holder Name: _____
Card Holder Address: _____
Signature: _____