New Mexico Taxation & Revenue Department, Motor Vehicle Division

Nontraditional Communication or Disability Registry Enrollment

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Pursuant to New Mexico Statute 66-2-18 NMSA 1978, a vehicle owner may apply to have their vehicle added to a registry if a driver or passenger of the vehicle has an eligible condition or disability as diagnosed by a licensed health practitioner. This registry database will be accessible by law enforcement. This form must be submitted for adding, removing, or modifying information within the registry. It must be submitted in person at a field office.

Owner Declaration

Owner Name: _____

Street Address: _____

City, State, ZIP Code: _____

Owner Signature: _____

Date: _____

I affirm that either the driver and/or passenger of the vehicle(s) listed below has a condition or disability that may make it difficult to communicate with a peace officer. For this reason, I would like the vehicle(s) added to the registry.

Vehicle(s) Information (List elsewhere if more vehicles need to be listed)

Vehicle VIN: _____

Plate (optional): _____

☐ **Add vehicle to registry**

☐ **Remove vehicle from registry**

Vehicle VIN: _____

Plate (optional): _____

☐ **Add vehicle to registry**

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☐ **Remove vehicle from registry**

Vehicle VIN: _____

Plate (optional): _____

☐ **Add vehicle to registry**

☐ **Remove vehicle from registry**

To be filled out by a Licensed Health Practitioner (only required if adding or modifying)

Conditions that apply:

☐ **Autism Spectrum Disorder**

☐ **Deafness**

☐ **Brain Injury**

☐ **Intellectual Disability**

☐ **Behavioral Health Disorder**

☐ **Dementia**

☐ **Seizure Disorder**

Licensed Health Practitioner Name: _____

Health Practitioner License Number: _____

Office Telephone Number: _____

Office Street Address: _____

City, State, ZIP Code: _____

I certify that the above vehicle(s) may be driven or occupied by a person with the above-checked conditions/disabilities.

Physician's Signature _____

Date Signed: _____