Texas Department of Motor Vehicles

Change to eTAG Contact Information

WHO SHOULD SUBMIT THIS FORM

Complete this form to change the contact information for an existing eTAG system account.

FORM SUBMISSION	
By Mail:	Texas Department of Motor Vehicles Motor Vehicle Division P. O. Box 26487 Austin, TX 78755
By Fax:	(512) 465-4190
By email:	MVD_OnlineSupport@TxDMV.gov
FOR ASSISTANCE with this form, please call toll free (888) 368-4689.	

GENERAL INSTRUCTIONS

Please print legibly or type.
Please complete each item of the form.
This form must contain the signature of an authorized officer or the licensee's eTAG contact.
Please note that when you change your eTAG information, a new username and password will be generated and sent to the new email address provided below.

eTAG Contact Information

DEALER LICENSE NUMBER: _____

NEW CONTACT FIRST NAME: _____

NEW CONTACT MIDDLE INITIAL: _____

NEW CONTACT LAST NAME: _____

NEW CONTACT PHONE NUMBER: _____

NEW EMAIL ADDRESS: _____

SIGNATURE

I hereby request the Texas Department of Motor Vehicles to change our eTAG license contact information, as entered above.

Printed Name and Title	Signature of Authorized Officer or eTAG Contact	Date

Privacy Statement

The Texas Department of Motor Vehicles maintains information collected through this form. With few exceptions, Texas Government Code Chapter 559 entitles you to: (a) request to be informed about this information, and (b) have TxDMV correct information about you that is incorrect. Chapter 552 of the Government Code entitles you to receive and review this information. You must submit requests for information in writing. Requests may be submitted via email to OGCOpenRecords@TxDMV.gov; by fax to (512) 465-4112; or by mail or in person to: TxDMV, OGC Open Records, 4000 Jackson Ave., Austin, TX 78731. For more information, please call TxDMV at (888) 368-4689.