This form is initiated by the Primary Physician. If you are the Primary Physician and you are completing the Eye Exam information Page 2, leave the "Eye Exam Physician" role blank. If you are not comfortable or able to complete this section, please enter a name and email for the "Eye Exam Physician" role.

In order to complete and submit form DL-122A online please click the link below.

After clicking on the link, you will be prompted to enter your Full Name and Email address. You may also be prompted to enter another signer’s Full Name and Email address if your form requires multiple signatures. When complete, click “Begin Signing” and DL-122A will be displayed.

After you complete all required fields on the form, you will be prompted to add a signature at the end. Once completed and signed, you will be asked to “Finish”, which will email the completed form to PennDOT for prompt processing.

If you have any questions or comments, please call PennDOT’s Driver and Vehicle Services Customer Call Center at 717-412-5300 and reference “Driver Licensing Form” for questions on the form itself, or “DocuSign DVS” for technical issues with the digital signature process.