

APPLICANT INFORMATION

Last Name (including suffix)

Address

DMV EXAMINER SIGNATURE:

Telephone Number with Area Code



Date of Birth

Zip Code

Middle Name

City/State

Washington, DC E-mail Address

PROOF OF DC RESIDENCY CERTIFICATION

Apt/Unit Number

First Name

CERTIFIER INFORMATION Last Name (including suffix) First Name				Middle Name	Date of Birth	
Last Name (melaung sumx)		i ii st i vaiii e		Middle Name	Date of Birtin	
Address		Apt/Unit Number		City/State	Zip Code	
		7.puomentumbo.		Washington, DC	2.0 0000	
Telephone Number with Area Code				E-mail Address		
Telephone Hum	bei Willi Alea Co			E man Address		
DC Driver License or DC Identification Card Number				Expiration Date		
				ZAPITANION DATE		
The certifier must sign this form a certifier must also provide a valid D listed above AND two (2) of the follows:	C Driver Licen	se or valid DC Identifica	tion Ca	ard reflecting their name a	and the address	
Utility Bill (water, gas, electric, oil or cable) issued within the last 60 days	Unexpired Homeowner's or Renter's Insurance Policy			Student Loan Statement issued within the last 60 days		
Telephone Bill (cell phone, wireless, or pager bills accepted) issued within the last 60 days	Official Mail – received within 60 days from ANY Government Agency to include contents and envelope, excluding mail from DC DMV (Change of Address Notifications from the Postal Service are NOT accepted)			Car/Personal Loan Statement (coupon books or vouchers are NOT accepted) issued within the last 60 days		
Unexpired Lease or Rental Agreement with the name of the certifier as a lessor, lessee, permitted resident or renter	Unexpired Sublease accompanied by the original unexpired Lease with the name of the certifier as sub-lessor			Home Line of Equity statement issued within the last 60 days Deed or Settlement Agreement		
DC Property Tax Bill issued within the last 12 months	Bank Statement issued within the last 60 days			Investment Account Statement issued within the last 60 days		
Home Security System Bill issued within the last 60 days	Credit Card Statement issued within the last 60 days			Medical Bills issued within the last 60 days		
Any person using a fictitious name or and subject to a fine of not more than I hereby certify that the information	\$1,000 or 180 d	ays imprisonment or both.	(D.C. O	fficial Code §22-2405)	ation of DC Law	
Applicant's Signature:				Date:		
Certifier's Signature:				Date:		
	FOR	DMV OFFICIAL USE O	NLY			

DATE: