



PROOF OF DC RESIDENCY APPLICATION

APPLICANT INFORMATION

Last Name	First Name	Middle Name	Suffix
Address	Apt/Unit Number	City/State	Zip Code
		WASHINGTON, DC	
Telephone Number with Area Code		E-mail Address	

CERTIFIER INFORMATION

Last Name	First Name	Middle Name	Suffix
Address	Apt/Unit Number	City/State	Zip Code
		WASHINGTON, DC	
Relationship	Telephone Number with Area Code	E-mail Address	
DC Driver License or DC Identification Card Number		Expiration Date	

Certifier must sign this form attesting that the above applicant resides with the Certifier in the District of Columbia. The Certifier must also provide a valid DC Driver License or valid DC Identification Card reflecting the Certifier's name and address listed above AND one (1) of the following proof of residency documents reflecting Certifier's name and DC address. If Certifier doesn't have a valid DC Driver License or valid DC Identification Card, he/she can provide a valid Passport plus two (2) of the items listed below:

<ul style="list-style-type: none"> Utility bill (water, gas, electric, oil or cable): provide entire bill issued within 60 days 	<ul style="list-style-type: none"> Valid Homeowner or Renter insurance policy reflecting name and DC address
<ul style="list-style-type: none"> Telephone bill (no cell phone or pager bills accepted): provide entire bill issued within 60 days 	<ul style="list-style-type: none"> Lease or rental agreement issued within the last 2 years with the name of the Certifier as a lessee or renter
<ul style="list-style-type: none"> DC Property Tax bill issued within the last 12 months 	<ul style="list-style-type: none"> Deed or Settlement Statement

Any person using a fictitious name or address and knowingly making any false statement on this application is in violation of DC Law and subject to a fine of not more than \$1,000 or 180 days imprisonment or both. (D.C. Official Code §22-2405)

I hereby certify that the information contained on this application is true and correct.

Applicant's Signature: _____ Date: _____

Certifier's Signature: _____ Date: _____

FOR DMV OFFICIAL USE ONLY

DMV EXAMINER SIGNATURE: _____ **DATE:** _____