DMV PROOF OF RESIDENCY LETTER

This Residential Address Verification	n Form ("Form") is entered into on the
	day of,
20	, by and between the undersigned individual
("Declarant") and the Department of I	Motor Vehicles ("DMV"). This Form serves as official
documentation to verify the Declaran	t's residential address for DMV records, often required for
obtaining or renewing a driver's licen	se or state identification card.
1. DECLARANT INFORMATION	
Name:	
Residential Address:	
City:	
State:	
Zip Code:	
Phone:	
Email:	

2. PURPOSE

The purpose of this Form is to provide the DMV with accurate and current residential address information for the Declarant, which is necessary for processing DMV-related transactions such as obtaining or renewing a driver's license or state identification card.

3. DECLARATION

The Declarant hereby declares under penalty of perjury that the information provided in this

Form is true, accurate, and complete to the best of their knowledge. The Declarant understands that providing false information may result in penalties, including but not limited to fines and revocation of DMV-issued documents.

4. OBLIGATIONS AND RIGHTS

The Declarant agrees to notify the DMV of any changes to their residential address within thirty (30) days of such change. The DMV reserves the right to verify the information provided and may request additional documentation if deemed necessary.

5. GOVERNING LAW

This Form shall be governed by and construed in accordance with the laws of the State of _______, and any disputes arising under this Form shall be resolved in the courts of said state.

6. SEVERABILITY

If any provision of this Form is found to be invalid or unenforceable, the remaining provisions shall continue in full force and effect.

7. ENTIRE AGREEMENT

This Form constitutes the entire agreement between the parties regarding the subject matter hereof and supersedes all prior agreements, understandings, or representations, whether oral or written.

8. NOTICE

Any notice required or permitted under this Form shall be in writing and shall be deemed given when delivered personally, sent by certified mail, or sent by recognized overnight courier to the addresses provided herein.

9. AMENDMENT

This Form may only be amended or modified by a written agreement signed by both the

Declarant and an authorized representative of the DMV.

10. TERMINATION

This Form shall remain in effect until the Declarant provides updated address information or until terminated by mutual agreement of the parties in writing.

11. SIGNATURES

By signing below, the Declarant acknowledges that they have read and understood the terms of this Form and agree to be bound by them.

Signature:	
Date:	
Print Name:	
12. WITNESS	
Witness Signature:	
Date:	
Print Name:	
13. NOTARY ACKNOWLEDGMENT	
State of	
County of	
On this	day of
	, 20
before me, a Notary Public in and for said s	tate, personally appeared
	, known to me or satisfactorily proven to be the
person whose name is subscribed to the wit	hin instrument and acknowledged that they executed
the same for the purposes therein contained	

Notary Public Signature:	
Date:	
Print Name:	
My Commission Expires:	

In witness whereof, I hereunto set my hand and official seal.

This Form is now ready for immediate use, printing, and signing.