FLORIDA DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES CERTIFICATION OF ADDRESS

(For Class E Driver License or Identification Cards Only)

Please submit this form to your local tax collector office or driver license service center.

https://www.flhsmv.gov/offices/

Sections 322.051 and 322.08, Florida Statutes, require that applicants provide proof of residential address documents to obtain a Florida Class E driver license or identification card. Two residential address documents from the approved documents list are required. If the applicant cannot provide two approved Florida residential address documents in their name, this affidavit must be used along with the documents provided by the individual whose name is on the proof of Florida residential address documents.

| A. APPLICANT INFORMATION (Person applying for a Florida Class E driver license or identification card) | | |
|---|--|---|
| Applicant Full Name | | |
| | 0.4 | |
| Residential Street Address | City | State Zip Code |
| I certify that the information provided above is true and correct. I understand that according to Florida Law, it is a crime to | | |
| knowingly make any false statement relating to the | application for driver license or identification | |
| Applicant Signature | | Date |
| B. CERTIFIER INFORMATION (Person providing and certifying residential proof of address) | | |
| Certifier Full Name | | |
| | | |
| I certify the information submitted on behalf of the above applicant is true and correct. The applicant resides at my residence at the address | | |
| listed above and I am providing the following allowable proof of residence documents: | | |
| Must provide one (1) household information document with the residential address in the name of the certifier: | | |
| Deed/Mortgage Property Tax Recent Monthly Mortgage Statement Rental or Lease Agreement | | |
| | | |
| *The purpose of this document is to establish that the address certifier owns or leases the property and therefore has the authority to allow the applicant to use the residential address. | | |
| Must provide one (1) supporting document with the residential address in the name of the certifier: | | |
| □ Florida Voter Registration Card □ Professional license issued by a U.S. government agency | | |
| Selective Service card Employer Documentation dated within last 60 days (ex. paycheck | | |
| □ Florida Vehicle or Vessel Documentation stub, W-2 form) | | |
| □ Utility bills dated within the last 60 days | | |
| (ex. water, gas, electricity, telephone/cell, cable, etc.) within last 60 days | | |
| □ Financial Statement dated within the last 60 days (ex. bank. credit card or investment account statements) □ Documents issued by Federal, State, County or City government agencies dated within last 60 days | | |
| (ex. bank, credit card or investment account stateme | | |
| | | ompleted by the local sheriff's to f Corrections dated within the last 30 |
| | days | tor corrections dated within the last 50 |
| I understand that according to Florida Law, it is a crime to knowingly make any false statement relating to application for a driver's license or identification card. | | |
| Certifier Signature | | Date |
| - | | |
| | | |
| C. NOTARY PUBLIC OR ISSUANCE PERSO | | |
| The certifier's signature must be notarized or witnesse | d by issuance personnel when the customer is | using that person's residential address |
| documents. | | |
| I hereby certify that this form in my presence. | appeared before me on this da | y of, 20 and signed |
| Issuance Personnel or | Notary Public | SEAL |
| Printed Name | State of County of | |
| | Printed Name | |
| | | |
| Signature | Signature | Exp |