**DMV AFFIDAVIT OF RESIDENCE**

Company/Organization [Name of company or organization] (if any)

Name [Name of affiant]

Street Address [Street address of affiant]

City, State [City, state abbreviation of affiant]

Zip [Zip code of affiant]

[Date]

**To Whom This May Concern,**

I, [Name of affiant], formally acknowledge that [Subject of affidavit] is a resident in the State of [State] with a street address of [Street address], City of [City], since [Date].

Furthermore, I swear and affirm under penalty of perjury that the facts set forth in this statement are true and accurate.

Sincerely,

[Signature]

**Witness Acknowledgment**

I/We, as witness(es) to the aforementioned claims made by [Name of affiant] and acknowledge their residency status.

|  |  |  |
| --- | --- | --- |
| [Signature] |  | [Date] |
| Signature |  | Date |

[Name of witness]

|  |  |  |
| --- | --- | --- |
| Full Name | | |
| [Signature] |  | [Date] |
| Signature |  | Date |

[Name of witness]

|  |
| --- |
| Full Name |

**Notary Acknowledgment**

A Notary Public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of [State of notary]

County of [County of notary]

On, [Date] before me, [Name of notary public], Notary Public, personally appeared [Name of affiant] who proved to me on the basic of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of in the State of [State Of Notary] that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

Signature: [Signature]

Place Notary Seal Above Print Name [Name of Notray Public]