



6-MONTH RESIDENCY CERTIFICATION FOR LIMITED PURPOSE CREDENTIAL

APPLICANT INFORMATION

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

Applicant must certify residence in the District of Columbia for at least six (6) months prior to the date of application. To certify, applicant must provide proof of current DC address and two (2) documents from the list below **issued at least six (6) months** prior to application date.

<ul style="list-style-type: none"> • Utility Bill (water, gas, electric, oil or cable) 	<ul style="list-style-type: none"> • Unexpired Homeowner's or Renter's Insurance Policy 	<ul style="list-style-type: none"> • Student Loan Statement
<ul style="list-style-type: none"> • Telephone Bill (cell phone, wireless, or pager bills accepted) 	<ul style="list-style-type: none"> • Official Mail – received from ANY Government Agency to include contents and envelope 	<ul style="list-style-type: none"> • Car/Personal Loan Statement (coupon books or vouchers are NOT accepted)
<ul style="list-style-type: none"> • Unexpired Lease or Rental Agreement with the name of the certifier as a lessor, lessee, permitted resident or renter 	<ul style="list-style-type: none"> • Unexpired Sublease accompanied by the original unexpired Lease with the name of the certifier as sub-lessor 	<ul style="list-style-type: none"> • Home Line of Equity statement • Deed or Settlement Agreement
<ul style="list-style-type: none"> • DC Property Tax Bill 	<ul style="list-style-type: none"> • Bank Statement 	<ul style="list-style-type: none"> • Investment Account Statement
<ul style="list-style-type: none"> • Home Security System Bill 	<ul style="list-style-type: none"> • Credit Card Statement 	<ul style="list-style-type: none"> • Medical Bills

Proof of Residency Certification For Minors (Under Age 18)

*Does NOT require documents issued at least six (6) months prior to application date

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: _____

FOR DMV OFFICIAL USE ONLY

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

Visit our website: www.dmv.dc.gov or call 311 in DC or 202-737-4404 for additional information.
To report waste, fraud, or abuse by any DC Government Agency or official, call the Office of the DC Inspector General at 1-800-521-1639.