# SOCIAL SECURITY NUMBER DECLARATION
FOR LIMITED PURPOSE CREDENTIAL

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>Middle Name</th>
<th>Date of Birth</th>
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I certify that I have not been assigned a social security number, have been assigned a social security number but cannot establish legal presence in the United States at the time of application or, I am ineligible to obtain a social security number.

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:____________

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**FOR DMV OFFICIAL USE ONLY**

DMV EXAMINER SIGNATURE:_________________________________ DATE:____________

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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.

DC DMV-SSN-001 Version 3/31/14