



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 category 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 (no disconnect bills) • Telephone Bill (no disconnect bill) • DC Property Tax Bill • DC DMV Approved Form from Certified Social Service Provider (Identification Card Only) *Does NOT require second source of residency document • Bank Statement (no credit card statement) 	<ul style="list-style-type: none"> • Homeowner or Renter insurance policy reflecting name and DC address • Unexpired Lease or Rental agreement with the name of the Applicant as a lessee, permitted resident, or renter • Deed, Mortgage or Settlement Statement • Official Mail - received from Federal or DC Agency other than DC DMV (Must include applicant's first and last name, complete address, as well as the envelope and contents) • DC DMV Proof of Residency Form
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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.