

Alternative Residency Affidavit

For use by Individual Applicants under age 18, present at RMV Service Center

This affidavit may be presented by individuals unable to prove Massachusetts Residency using the established acceptable residency documents list due to their status as a minor, defined as an individual under the age of 18. Upon proper completion, review and approval of an RMV representative, this affidavit may be accepted as one proof of Massachusetts residency.

CERTIFICATION INSTRUCTION OPTIONS FOR INDIVIDUALS UNDER THE AGE OF 18. Choose Option 1 or Option 2.

Option 1) Applicants under the age of 18 may appear with their Parent/Guardian at an RMV Service Center and complete this affidavit in the presence of an RMV official. The Parent/Guardian must hold a Massachusetts License/ID showing same residential address as the applicant.

Option 2) Applicants under the age of 18 may appear with their Parent/Guardian to complete this form in the presence of a Notary Public prior to presentation at the RMV. The Parent/Guardian must present to the notary public a Massachusetts License/ID showing the same residential address as the applicant. The Parent/Guardian is not required to be present at the time of application at the RMV if Option 2 is chosen and completed.

| Applicant Information | | | | | | | | | |
|--|--|---|---------|--|----------|--------|------|--------|----|
| Name | | | | | | | | | |
| Residential Address (Must be a street ad | dress. PO Box, business or commercial addres | ses are not acceptable | ə.) | | | | | | |
| Street | City | Sta | ate | Zip | Code | • | | | |
| Email | | | | Pho | | | | | |
| Applicant Signature: | | Date: | | | | | | | |
| Certification and Signature of Parent/C | Guardian | | | | | | | | |
| I hereby certify that the above named ind | ividual resides at the location indicated above. | | | | | | | | |
| Name | | | | sachusetts Driver's License entification Card Number: | | | | | |
| | | | S | | | | | | |
| Residential Address (Must be a street ad | dress. PO Box, business or commercial addres | ses are not acceptable | ∋.) | | | | | | |
| Street | City | Sta | ate | Zip | o Code | ŧ | | | |
| Relation to the Applicant | | | | | | | | | |
| penalties of perjury and that I may be put | his Affidavit and swear that they are true and consistent for false statements by fine, imprisonmer /ID Card may be revoked for false statements. | | | | | | | | |
| Parent/Guardian Signature: | | Date: | | | | | | | |
| Notary Public Certification Section Co | mplete only if Option 2 is chosen. | | | | | | | | |
| (name of Parent/Guardian signer) persor , to be the p | , 20, before me, the undersigned no ally appeared, proved to me through satisfacto erson who signed the preceding or attached do and accurate to the best of (his) (her) knowledo | ry evidence of identific cument in my presence | e and v | who swo | ore or a | | | | |
| | | | | Commo | onwea | lth of | Mass | achuse | ts |
| | | | | County | / of | | | | |
| | | | | Commi | ission | Expire | es:_ | | |