



DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTORIST SERVICES
2900 Apalachee Parkway
Neil Kirkman Building - Tallahassee, FL 32399

C E R T I F I C A T I O N O F A D D R E S S

Date _____

I do hereby certify that:

Name (First) (Middle) (Last)

Date of Birth _____

Resides at:

Street, Apartment

City State Zip Code

SPECIAL CONDITIONS:

- Self Certification
- Released from Incarceration**
- Homeless*
- Other _____

Signature of Addressee/Customer Print Name of Addressee/Customer Date

INSTRUCTIONS:

A Certification of Address form completed and signed by the customer is accepted as proof of residential address, providing it is accompanied by:

- o One proof of residential address in the customer's name or;
- o One proof of residential address in the name of the person with whom the customer resides. ***

* Homeless customers may present a letter listing the customer's name from a shelter, public assistance agency representative along with the completed Certification of Address form.

** Customers released from incarceration may present an Address Verification Letter from the Department of Corrections (with an Inmate Identification Card and Certificate of Discharge) along with the completed Certification of Address form.

*** Check out what to bring with you as proof of your new address:

flhsmv.gov/whattobring