

DECLARATION OF HOMELESS STATUS

This form must be submitted along with a DMV-002 (Application for Driving Privileges or ID Card).

LAST NAME (Please Print)	FIRST NAME	MIDDLE NAME	SUFFIX	
ADDRESS WHERE I AM STAYING				
CITY	STATE	ZIP		

25 AND OLDER NRS 483.417 and NRS 483.825	UNDER 25 483.410 and 483.820	
I am requesting a duplicate:	I am requesting an/a:	
 Non-Commercial Driver's License Instruction Permit Identification Card Fees will be waived one time only and you must reimburse the Department the cost of the photo fee when you renew your card, if employed at that time. 	 Original Duplicate Renewal (Choose one) Non-Commercial Driver's License Driver Authorization Card Instruction Permit Identification Card 	
	All fees for this issuance will be waived one time only and are not required to be reimbursed at any time.	

I hereby certify under penalty of perjury that all statements in this application are true and correct. I agree and understand that any misstatement of material facts may cause cancellation and/or denial of my driver's license, instruction permit or identification card under NRS 483.420 and 483.530. I further understand that any misstatement of facts may be a misdemeanor or felony under NRS 483.530 and may be punishable pursuant to NRS 193.130.

SIGNATURE OF APPLICANT	DATE

Signatures must be originals. Photocopies are not acceptable. Changes may not be made to this form once it is signed.