



AFFIDAVIT OF NEW MEXICO RESIDENCY



Applicant Information

Name			
Resident Address	City	State NM	Zip Code
Email Address		Phone Number	
I hereby declare under penalty of perjury that the information given in this statement is true and correct to the best of my knowledge.			
_____ Signature of Applicant			_____ Date

Representative Information

A representative who provides services to the applicant at the address listed above must complete the Representative Information below certifying that the applicant resides or receives services at that address.

Representative Name	Name of Organization		
Resident Address	City	State NM	Zip Code
I hereby declare under penalty of perjury that the information given in this statement is true and correct to the best of my knowledge. The applicant does live at this residence or receives services and mail at the address listed above.			
_____ Signature of Representative			_____ Date

State of New Mexico
County of _____

Acknowledgement: On the _____ day of _____ (month) of _____, the above named person, either personally known to me or identified through satisfactory evidence, appeared to me and indicated that he/she signed the foregoing document voluntarily for the purposes herein.

Signature of Notarial Official

My Commission Expires _____

Place Notary Seal or Stamp Here

Warning: Any person who makes any false affidavit, or knowingly swears or affirms falsely to any matter required by the Motor Vehicle Code is guilty of perjury, which is a fourth degree felony (Sections 66-5-38 and 30-25-1 NMSA 1978).

Bring this completed affidavit and all required original documents to your local MVD Field Office.