NEW YORK STATE | Department of Motor Vehicles

STATEMENT OF IDENTITY

dmv.ny.gov

For applicants who can be considered a disenfranchised youth experiencing homelessness

This document is used for *identity only* and cannot be used for *proof of date of birth*. Proof of date of birth and Social Security requirements must be met.

This document cannot be used as proof to obtain a Commercial Driver License (CDL), or a REAL ID, or an Enhanced credential.

This statement may only be used by an applicant who can be considered a disenfranchised youth experiencing homelessness, is represented by a government or government-approved facility, AND who cannot provide sufficient proof of identity from the proofs listed on form ID-44 (Proofs of Identity).

The applicant and the approved facility representative may use the following method to provide acceptable PROOF OF NAME/ IDENTITY:

- The applicant **must** meet the Social Security and proof of date of birth requirements.
- The approved representative **must accompany the applicant** when the applicant applies for a permit/ID card and **must sign this form in the presence of a Motor Vehicle Representative.**
- The applicant's representative must be a government or government-approved facility representative, and must provide a letter on the facility's letterhead, signed by the facility's director which verifies the applicant's name, date of birth, height, eye color, address, the name of the facility and the name of the representative.
- The representative's original NYS-issued photo document or other documents which meet the identification requirements listed on form ID-44 must be provided with the above documents at the time of the application.

CERTIFICATION

I, _____, certify as the Representative
(Full Name of Representative)

of _____,
(Full Name of Applicant)

that the applicant is currently without a permanent place of residence, that this is the applicant's full name and that the applicant receives mail at the facility's mailing address provided below. To the best of my knowledge, the applicant has not obtained or applied for a learner permit, non-driver identification card or driver license in any other name. I understand that making a false statement, or submitting any documentation in support that is false, may be punishable as a criminal offense. This certification must be accompanied by an original letter from the government facility that has approved the applicant's representative (see above).

IMPORTANT: DO NOT SIGN THIS FORM UNTIL YOU ARE WITH A MOTOR VEHICLE REPRESENTATIVE.

APPLICANT'S REPRESENTATIVE Sign Here **X** _____

Print Name: _____

Identification No. from Driver License, Permit or Non-Driver ID Card: _____

Print Facility's Name: _____ Facility's Phone No.: _____

Facility's Mailing Address: _____

IMPORTANT: DO NOT SIGN THIS FORM UNTIL YOU ARE WITH A MOTOR VEHICLE REPRESENTATIVE.

APPLICANT Sign Here **X** _____

OFFICE USE ONLY

Proofs of Identify Presented by Representative:

☐ NYS Photo Driver License/Permit/Non-Driver ID ☐ Social Security Requirements ☐ Original Facility Letter

☐ Proof of DOB: _____ ☐ Proof of ID: _____

Signature of Person Accepting Proof X _____

Title of Person Accepting Proof: _____

Office: _____ Date _____

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