



## DECLARATION OF HOMELESS STATUS NRS 193.130 & NRS 483.410 to 483.825

This form must be submitted along with the 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 CODE

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