# **EIVERSIDE FESIDENCE VERIFICATION FORM**

## **RIV.Dat Resident Information Verification Data**

To qualify as a resident, proof of residency is required. By completing our RIV.Dat form, residents can avoid having to prove their residency each time a child or adult registers for any program, class, event or facility rental.

#### **PROOF OF RESIDENCY REQUIRED**

Please provide proof of residency for all individuals within your household and complete the RIV.DAT form. The proof must include the following: SECTION I

#### **RIVERSIDE RESIDENT ADULT**

- A valid picture identification such as a California Drivers License or California I.D., Military I.D., Passport, Government issued I.D., or College I.D.
- 2. And one of the following items: Utility Bill - issued within the last 90 days Credit card or bank statement - issued within the last 90 days Rent receipt - issued within the last 90 days Car registration Tax bill or escrow papers

#### SECTION II

#### RIVERSIDE RESIDENT CHILDREN (Under 18 years of age)

 Birth Certificate, Medical Insurance Card with birth date, Immunization Card, or California Drivers License or I.D.

## Address is subject to verification by CADME Map of Riverside city boundaries.

Note: Sorry, we cannot accept a P.O. Box for a mailing address. When mailing in proof of residency, please send photocopies, **not originals. We are not** responsible for returning originals. \*Please "White Out" or cross out Driver's License or Social Security numbers for confidentiality protection before sending it in to the City of Riverside Parks, Recreation and Community Services Department.

We appreciate your support in our process! Please call the City of Riverside Parks, Recreation and Community Services Department at 826-2000, if you have any questions.

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By completing this form you will be allowed ongoing registration/facility reservation without having to show proof of residency, which would otherwise be required at <u>each</u> instance of registration or facility reservation. <u>ALL INFORMATION WILL BE CONFIDENTIAL</u>.

### HEAD OF HOUSEHOLD INFORMATION

Last Name		First Name		M / F	Birth date
Street Address		Nearest Cross Streets			City
Zip Code	Day Phone (	)	Evening Phone	( )	
Spouse Last Name		First Name	E-mail Address		

Please list each household member who may participate in one of our classes/programs separately, even if at this time they don't intend to register for a City of Riverside Parks, Recreation and Community Services Department Program/Class or Facility rental. <u>Birth Verification must be shown at the time this form is received, even if at this time they don't intend to register for a City of Riverside Parks, Recreation and Community Services Department Program/Class.</u>

LAST NAME	FIRST NAME	BIRTH DATE	M / F	BIRTH VERIFICATION
(Sample line) Smith	Joe	01/2/88	м	Ľ
1.				
2.				
3.				
4.				
5				

STAFF USE ONLY							
Residency Verification Information		Staff Information					
Type of Photo I.D.:           Must have two forms of proof of residency)		ate:					
Second proof of residency:		Staff Name:					
Facility Rental Contract Cla Downtown use only)	iss or Program Fa	cility where taken:					
leceipt #		ate Entered into database: Staff initials:					

Visit the City's web site at www.RiversideCa.gov