



A Public Service Agency

VERIFICATION FOR REDUCED FEE IDENTIFICATION CARD

Instructions to the governmental or non-profit entity:

Please complete this form in its entirety and give to the applicant for further processing. *This form must be presented to DMV within 60 days of its completion by the governmental or non-profit entity.*

I, _____
PRINT NAME OF REPRESENTATIVE FOR ENTITY

representing a governmental or non-profit entity:

ENTITY NAME

STREET ADDRESS

CITY STATE ZIP CODE TELEPHONE NUMBER ()

certify under penalty of perjury under the laws of the State of California that all the information on this form is true and correct and that the individual named:

APPLICANT'S NAME

meets the eligibility requirements for assistance programs under Chapter 2 or Chapter 3 of Part 3 of, or part 5 of, or Article 9 of Chapter 10 of Part 6 of, or Chapter 10.1 or Chapter 10.3 of Part 6 of, Division 9 of the Welfare and Institutions Code and is qualified to obtain a California Identification card for a reduced fee as defined in Vehicle Code § 14902(c).

X _____
SIGNATURE OF REPRESENTATIVE DATE

Instructions to the applicant:

Please bring this original, completed form to DMV along with your payment and the Driver License or Identification Card Application (DL 44 form). Original documentation may be required to complete your application. Refer to the California Driver Handbook.

Save time, make an appointment online at www.dmv.ca.gov or call 1-800-777-0133.