



I, _____, born on ____/____/____,
Full Legal Name Date of Birth (Month/Day/Year)

have never been issued a Social Security number.

_____, Signature Date

I understand that making a false statement on this affidavit, or submitting any documentation that is false, may be punishable as a criminal offense.

If you are mailing in an application or renewal, this affidavit MUST be witnessed by a certified Notary Public.

If you are submitting this affidavit in a DMV office, the Motor Vehicle Representative MUST witness your signature.

FOR NOTARY:

STATE OF NEW YORK)
) SS.:
COUNTY OF)

On this _____ day of _____, 20____, before me personally came _____, to me known and known to me to be the person described in and who executed the foregoing instrument and she/he acknowledged to me that she/he executed the same.

Notary Public (Please sign and affix stamp)

My Commission Expires: _____

FOR OFFICE USE ONLY

OFFICE _____

MVR Signature

Date