



Affidavit of No Social Security Number

Registry of Motor Vehicles
P.O. Box 55889 • Boston, MA • 02205-5889

A. Instructions/Instrusons

Cape Verdean Creole/Kriolu Caboverdianu

Complete this form if you are applying for a standard Driver's License and do not have a Social Security Number issued to you by the Social Security Administration. This form can only be used if presenting certain identification documents.

This form must be signed in the presence of a notary public or the Registrar's designee at an RMV Service Center.

Konpleta es formulariu si bu stiver ta kandidata pa un Karta Konduson standard y bu ka ten un Numeru di Seguransa Sosial imitidu pa bo di Administrason di Seguransa Sosial. Es formulariu so podi ser uzadu si bu stiver ta aprezena sertus dokumentus di identifikason.

Es formulariu debi ser sinadu na prezensa di un notariu publiku o representante di Rejistru na un Sentru di Servisu di RMV.

B. Applicant Information, Attestation, and Signature/Informason di Kandidatu, Atestadu, y Sinatura

Last Name/Apelidu	First Name/Primeru Nomi	Middle Initial/Inisial di Nomi di Meiu	Suffix/Sufixu
Date of Birth (MM/DD/YYYY)/Data di Nasimentu (MM/DD/AAAA)			

I certify that I have never been issued a Social Security Number.

N ta sertifika ma nunka n rasebi un Numeru di Seguransa Sosial.

I swear (affirm), under the penalties of perjury, that the information I have provided is true and correct. I am aware that false statements are punishable by fine, imprisonment, or both.

N ta jura (afirma), sob pena di perjuriu, ma informason ki n fornesi e verdaderu y kuretu. N sta sienti ma deklarasons falsu e punivel ku multa, prizon, o tudu dos.

Signature/Sinatura: _____ Date/Data: _____

C. Notary Certification (if not signed in front of Registrar's designee)/Sertifikason Notarial (si ka for sinadu na frenti di representante di Rejistru)

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 Signature

Notary Public Stamp

Commission Expiration Date: _____

RMV USE ONLY

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This affidavit was notarized.

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This affidavit was signed in an RMV Service Center in front of the CSR named below.

Service Center: _____ Date: _____

CSR Name: _____ CSR Signature: _____