AFFIDAVIT FOR PROOF OF RESIDENCY

Client's Name:
Address:
SS #:
The person listed below, I certify and attest do not live at this address,
(Deed / Tax Bill / Mortgage / Utility Bill/Lease/ Property Title (Mobile Home) (Please circle one)
Check one:
I have provided documents showing their residence.
I do not know their current residence.
Client Signature: Date:

(If stating that you do not know the current residence it will be submitted to state for verification of address. Documents that can be submitted as proof of new residency: Driver License, State ID, or mail)