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ONE AND THE SAME AFFIDAVIT

Please Print or Type

I, \_\_\_\_\_, hereby swear under penalty of NRS 482.545, that the following assertions are true of my own personal knowledge:

1. I reside at \_\_\_\_\_ Physical Address
\_\_\_\_\_ City State Zip Code

2. My mailing address is \_\_\_\_\_ Mailing Address
\_\_\_\_\_ City State Zip Code

3. I, \_\_\_\_\_, am the same person as \_\_\_\_\_.

4. My Nevada Driver's License, Identification Number, Date of Birth, or FEIN for a business \_\_\_\_\_

State of Nevada

County of \_\_\_\_\_

Signed and sworn to before on \_\_\_\_\_ Date

By \_\_\_\_\_ Signature of Affiant

Notary Stamp

\_\_\_\_\_  
Notary Public or Authorized Nevada DMV Representative

Signatures must be originals. Photocopies are not acceptable.
Changes may not be made to this form once it is signed and witnessed.