



DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTORIST SERVICES
2900 Apalachee Parkway
Neil Kirkman Building - Tallahassee, FL 32399

**SELF - CERTIFICATION OF
SOCIAL SECURITY NUMBER**

Date _____

I do hereby certify that:

Name (First) (Middle) (Last)

Date of Birth _____

Social Security Number _____

Signature of Customer *Print Name of Customer* *Date*

INSTRUCTIONS:

A Self-Certification of the social security number form that is completed and signed by the customer is accepted as proof of the social security number, providing the number verifies through the Social Security Administration Verification System.

If the social security number presented on this form does not verify, customer will need to provide proof of the social security number for issuance of a Florida driver license or identification card.

Note: A list of documents that can be used as proof of the social security number can be found at <http://www.gathergoget.com/>.

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