

APPLICATION FOR STATE OF MAINE IDENTIFICATION CARD

FEE \$5.00

(PLEASE PRINT CLEARLY)

NAME: \_\_\_\_\_  
FIRST MIDDLE LAST

MAINE MAILING ADDRESS: \_\_\_\_\_  
STREET/P.O. BOX CITY/TOWN STATE ZIP

ACTUAL RESIDENCE: \_\_\_\_\_  
STREET/ROUTE CITY/TOWN STATE ZIP

DATE OF BIRTH: \_\_\_ / \_\_\_ / \_\_\_ SEX: ( ) MALE ( ) FEMALE \_\_\_\_\_  
SOCIAL SECURITY NUMBER

HEIGHT: \_\_\_ FT. \_\_\_ IN. WEIGHT: \_\_\_\_\_ LBS. HAIR COLOR: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_

SOCIAL SECURITY NUMBER DISCLOSURE STATEMENT

This statement is made in accordance with the Federal Privacy Act of 1974, Section 7(b). Disclosure of your Social Security Number is mandatory and is required by 29-A MRSA § 1301(5) and (6) to apply for or renew a driver's license or non-driver identification card. Your social security number will be used solely for identification purposes and will be kept confidential.

**"I UNDERSTAND THAT KNOWINGLY SUPPLYING FALSE INFORMATION ON THIS FORM IS A CLASS D CRIME UNDER TITLE 17-A, PUNISHABLE BY CONFINEMENT OF UP TO 364 DAYS OR BY MONETARY FINE OF UP TO \$2000.00 OR BOTH"**

\_\_\_\_\_  
SIGNATURE IN INK DATE

SEE REVERSE FOR I.D. REQUIREMENTS

**2 OF THE FOLLOWING DOCUMENTS ARE REQUIRED FOR IDENTIFICATION**  
ONE **MUST** INDICATE YOUR DATE OF BIRTH AND THE OTHER **MUST** BEAR YOUR WRITTEN SIGNATURE. IF YOU ARE THE HOLDER OF A DRIVER'S LICENSE FROM ANY STATE OR PROVINCE, THAT LICENSE **MUST ALSO** BE PRODUCED.

**NO PHOTO COPIES ACCEPTED\***

<input type="checkbox"/> BAPTISMAL RECORDS	<input type="checkbox"/> DRIVER'S LICENSE	<input type="checkbox"/> DRAFT CARD
<input type="checkbox"/> ADOPTION PAPERS	<input type="checkbox"/> DRIVER'S PERMIT	<input type="checkbox"/> CONCEALED WEAPONS PERMIT (GUN PERMIT)
<input type="checkbox"/> SOCIAL SECURITY CARD	<input type="checkbox"/> COPY OF MARITAL APPLICATION	<input type="checkbox"/> COURT ORDER
<input type="checkbox"/> PASSPORT	<input type="checkbox"/> CERTIFICATE OF MARRIAGE	<input type="checkbox"/> DIVORCE PAPERS
<input type="checkbox"/> MILITARY I.D. CARD	<input type="checkbox"/> CITIZENSHIP PAPERS	<input type="checkbox"/> SCHOOL RECORD/ TRANSCRIPT (CERTIFIED)
<input type="checkbox"/> MILITARY DEPENDENT I.D. CARD	<input type="checkbox"/> DRIVER EDUCATION CARD	<input type="checkbox"/> MEDICAL RECORDS FROM DOCTOR/HOSPITAL
<input type="checkbox"/> MILITARY DISCHARGE/ SEPARATION (DD-214)	<input type="checkbox"/> BIRTH CERTIFICATE	<input type="checkbox"/> PARENT/GUARDIAN, (PARENT/GUARDIAN MUST APPEAR IN PERSON AND PROVE HIS/HER IDENTITY. APPLIES ONLY TO MINORS)

---

ISSUING OFFICIAL

**\*NOTE: A COPY OF A BIRTH CERTIFICATE IS ACCEPTABLE. HOWEVER, IT MUST HAVE AN EMBOSSED SEAL OR STAMP OF THE ISSUING AGENCY.**