



AFFIDAVIT OF IDENTIFYING WITNESS

* Signing this form affirms you personally attest to the identity of the Detroit ID card applicant. *
This completed form, witnessed and signed by a Notary Public, will be scanned and the scanned copy will become part of the applicant's record for two years as required by the City of Detroit.

I, _____ (Affiant printed name),
under penalty of perjury, attest to the following on this _____ day of _____
(month/year): *I swear or affirm before the undersigned Notary Public, that the person appearing with me, _____ (applicant name), is the applicant for the City of Detroit Municipal Identification Card. I have personally known this person in his/her capacity as my _____ (i.e. neighbor, church member, coworker, etc.); and it is my understanding that she/he does not possess certain required documentation for the City of Detroit Municipal Identification Card. I further attest I have no financial interest in, and am not a beneficiary of the underlying transaction.*

Affiant's Signature

Affiant's Phone Number

Affiant's Address

City, State

Sworn to and subscribed before me this _____ day of _____, 20__.

Notary Signature

Printed Name

My Commission expires: