TOMPKINS COUNTY SHERIFF'S OFFICE PERSONAL IDENTIFICATION CARD

INSTRUCTIONS FOR COMPLETING APPLICATION FOR PERSONAL IDENTIFICATION CARD

- REQUIRED PROOF OF AGE AND IDENTIFICATION: YOU MUST HAVE an Original Birth Certificate, Social Security Card, <u>PLUS</u> a photo identification <u>OR TWO</u> of the following: Temporary Driver's License, Military Papers, Payroll Stub, Health Insurance Card, Utility or Medical Bills, Credit Card, Bank Statement, School Records, Professional License, Vehicle Title, W2 Form, or a parent or guardian must be present. Other forms may qualify as approved by office personnel.
- 2) Please use your current LOCAL ADDRESS on the application.
- 3) Applicants under the age of 18 years old **MUST** have a parent or legal guardian present to fill out the Parent/Guardian portion of this form.
- 4) A \$15.00 fee is charge for **EACH** ID card. Photos are taken only at the Tompkins County Sheriff's Office.

WARNING: Misrepresentation, misuse or unauthorized use of this card or any falsification of this application will result in criminal prosecution.

NAME:			
LAST		FIRST	MIDDLE
ADDRESS:			
STREET A	ADDRESS	CITY	STATE ZIP CODE
DATE OF BIRTH:	//	AGE:	SEX:
HAIR:	WEIGHT:	lbs. HEIGHT: _	,, EYES:
HOME PHONE #:			
APPLICANTS SIGNA	TURE		
	Parent/	Guardian Certificat	lon
I,	,	certify as the parent/lega	l guardian of
(Name of Parent/Gu	uardian)		
	, W	ho resides at	
(Name of Applicant)		(Address)
that this name is the nam	ne by which he/she is a	commonly known. His/H	er date of birth is
/ /	and he/she was bo	rn at	
(Date of Birth)		rn at(Place of Birth	n)
			nor under the laws of the State of New York for a e a statement which such person does not
*****	*************** O F]	FICIAL USE ONLY***	(Signature of Parent/Guardian) ************************************
TYPE OF PROOF SHO	WN:		ID#:
ISSUING OFFICER:			DATE: / /