RESIDENCY AFFIDAVIT
FOR SOUTH DAKOTA RESIDENTS WHO TRAVEL
AND DO NOT HAVE A RESIDENCE IN ANOTHER STATE

The purpose of the following questions is to determine if you meet the qualifications for an exception of the proof of residency requirements for obtaining a South Dakota Driver License or non-driver ID card.

This form must be signed by a notary of the public or a South Dakota driver license examiner.

1. Is South Dakota your state of residence? _____Yes _____No

2. Is South Dakota the state you intend to return to after being absent? _____Yes _____No

3. Do you maintain a residence in another state? _____Yes _____No

This form must be accompanied by a valid one night stay receipt (no more than one year old) from a local RV Park, Campground, or Motel for proof of the temporary address where you are residing.

In addition you must submit a document (no more than one year old) proving your personal mailbox (PMB) service address (receipt from the PMB business or a piece of mail with your PMB address on it).

PLEASE NOTE: South Dakota Driver Licensing records are used as a supplemental list for jury duty selection. Obtaining a South Dakota driver license or non-driver ID card will result in you being required to report for jury duty in South Dakota if selected.

I declare and affirm under the penalties of perjury (2 years imprisonment and $4000 fine) that this claim (petition, application, information) has been examined by me and, to the best of my knowledge and belief, is in all things true and correct. Any false statement or concealment of any material facts subjects any license or ID issued to immediate cancellation.

_________________________ ______________________
PRINT NAME DATE

________________________________________________________________________
SIGNATURE

_________________________
Notary/South Dakota Driver License Examiner Signature (SEAL)

Commission Expires: ___________________________

If applicant is under the age of 18 a parent’s signature is required.

_________________________ ______________________
PARENT’S NAME DATE

_________________________________________
PARENT’S SIGNATURE