

# Affidavit of Military/Dependent or Principally Garaged Vehicle

North Carolina Department of Transportation  
Division of Motor Vehicles

I, \_\_\_\_\_, being first duly sworn or affirmed, do state:

1. My full legal name (including first, middle, and last) is \_\_\_\_\_
2. I am an active duty service member or dependent; or, it is my intention to principally garage the vehicle described below in North Carolina pursuant to G.S. 20-52. ("Principally garaged" means the vehicle is garaged for six or more months of the year on property in this State which is owned, leased or otherwise lawfully occupied by me.) I understand that I may not be a resident of the State of North Carolina for registration purposes, but I am present in this state due to my active military or dependent status; or I am not a resident and I am not present in the state due to active military or military dependent status, but intend to principally garage my vehicle here in this State for six months or more in a single calendar year pursuant to G.S. 20-52.

<b>Vehicle Description</b>		
Year _____	Make _____	Model _____
VIN _____		
Body Style _____	Fuel _____	

3. The address of the location where said vehicle will be registered and/or principally garaged is:

Address

City and Zip Code

4. I understand it is a violation of the Motor Vehicle Laws of North Carolina to use a false or fictitious name or address or to conceal a material fact in my application to verify my proof of residency. I also understand it is a Class I felony to make a false statement under G.S. 20-112 and G.S. 20-71.
5. I understand I must notify the Division of an address change within 60 days after the change occurs to be in compliance with G.S. 20-67 and may no longer be eligible to keep the above-listed vehicle titled or registered in the State of North Carolina if the vehicle is no longer principally garaged in this State or if my military or military dependent status or domicile changes to a different state.
6. I am a resident of the State of \_\_\_\_\_ and my permanent address in this home state is as follows:

Address

City, State and Zip Code

7. My out-of-state Driver's License/Identification Card number is \_\_\_\_\_ and is issued by the State of \_\_\_\_\_.
8. I understand that a copy of my Driver's License must be provided to the Division at the time my title is processed.
9. Dealers and processing agents must attach a copy of the customer's Driver's License with the application when submitted.

I declare the foregoing is true and correct:

\_\_\_\_\_  
Owner's Signature

Date \_\_\_\_\_ County \_\_\_\_\_ State of \_\_\_\_\_

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and in the capacity indicated: \_\_\_\_\_ (name(s) of principal(s))

Notary Signature \_\_\_\_\_

Notary Printed or typed Name \_\_\_\_\_

(SEAL)

My Commission Expires \_\_\_\_\_