

CERTIFICATE OF PARENTAL CONSENT
 2D REV. 8-2008

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLES
 BRANCH OPERATIONS
 On The Web At ct.gov/dmv



NAME OF 16 OR 17 YEAR OLD APPLICANT <i>(Last, First, Middle)</i>	APPLICANT'S DATE OF BIRTH <i>(Month, Day, Year)</i>
NAME OF APPLICANT'S PARENT, GUARDIAN OR SPOUSE OVER 18	CONSENTER'S DATE OF BIRTH <i>(Month, Day, Year)</i>

RELATIONSHIP TO APPLICANT
 PARENT **FOSTER PARENT** **LEGAL GUARDIAN** *(Court Appointed)* **SPOUSE OVER 18 YEARS OLD**
 OTHER RELATIVE _____

If the person giving consent *IS NOT* a parent, proper documentation of authority must be shown.

The information provided to the Commissioner of Motor Vehicles herein is subscribed by me, the undersigned, under penalty of false statement, in accordance with the provisions of Section 14-110 and 53a-157b of the Connecticut General Statutes. I understand that if I make a statement which I do not believe to be true, with the intent to mislead the Commissioner, I will be subject to prosecution under the above-cited laws.

LEARNER PERMIT / DRIVER LICENSE **MOTORCYCLE LEARNER PERMIT / MOTORCYCLE ENDORSEMENT** **MOTOR VEHICLE REGISTRATION**

VEHICLE IDENTIFICATION NUMBER <i>(If applicable)</i>			GROSS VEHICLE WEIGHT <i>(If applicable)</i>
REGISTRATION PLATE NUMBER	VEHICLE YEAR	VEHICLE MAKE	LIGHT VEHICLE WEIGHT <i>(If applicable)</i>
SIGNATURE OF PARENT, GUARDIAN OR SPOUSE OVER 18		DRIVER LICENSE OR DOCUMENTATION SHOWN	DATE SIGNED
X			

NOTARIZATION *(Not valid unless notarized below)*

SUBSCRIBED AND SWORN TO BEFORE ME:	PLACE SWORN	DATE SIGNED
SIGNATURE OF DULY AUTHORIZED PERSON (C. G. S. §1-24)		DATE COMMISSION EXPIRES OR JURIS NO.
X		