## Affidavit of Loss Driver's License

## STATE OF [State] COUNTY OF [County]

I, [Your Full Name], of legal age, having been duly sworn in accordance with law, do hereby depose and state:

- 1. That I am a legal resident of [Your Complete Address], within the jurisdiction of [City/Town], [State].
- That I was previously in possession of my driver's license issued by the [State] Department of Motor Vehicles, bearing License No. [Your Driver's License Number].
- That on or about [Date of Loss], in the vicinity of [Location of Loss], I discovered that my said driver's license was missing and despite diligent efforts to locate the same, it could not be found and is now considered lost.
- 4. That I have neither mortgaged nor pledged the said driver's license to any person or entity and that the loss was not caused by any fraudulent act or illegal transaction on my part.
- 5. That the said driver's license is being reported lost to prevent its fraudulent use or misuse by any unauthorized individual.
- 6. That I am executing this affidavit to attest to the truth of the foregoing facts and to request the issuance of a duplicate driver's license from the [State] Department of Motor Vehicles, in lieu of the one that was lost.

 That I am executing this affidavit to indemnify the [State] Department of Motor Vehicles from any liability or claim that may arise from the issuance of a duplicate license to me.

IN WITNESS WHEREOF, I have hereunto set my hand this \_\_\_\_ day of \_\_\_\_\_, 20 at [City/Town], [State].

## [Your Full Name] [Your Signature]

SUBSCRIBED AND SWORN to before me this day of	<b>, 20</b> , by [Your
Full Name], who is personally known to me or who has presented _	as
identification.	

Notary Public:

## [Notary Public's Name] [Seal]

Commission Number: \_\_\_\_\_

My Commission Expires: