



**DEPARTMENT OF WILDLIFE RESOURCES
LIFETIME LICENSE SALES & INFORMATION**

**P.O. Box 2978
HENRICO, VA 23228
866-721-6911**

(Hearing impaired call TDD# 804-367-1278)

**COMMONWEALTH OF VIRGINIA
DOMICILE CERTIFICATION OF RESIDENCY**

By completing and signing this form I, _____ certify to the
(Print name of applicant)

Commonwealth of Virginia, Department of Wildlife Resources, I have lived in Virginia for at least two months and not more than six months; and fully intend to make the Commonwealth of Virginia my permanent place of residence and become a Virginia resident by obtaining either a Virginia DMV issued driver's license or identification card after the sixth month, or as required by law.

I am and have been a domiciliary resident of _____ County/City in Virginia.

Applicant's Full Name: _____

Address: _____

City: _____ State: _____ ZIP: _____

Date of Birth: _____ Gender: Male Female

SIGNATURE: _____

DATE: _____

You are required to keep this completed form on your person when in use of your resident purchased Virginia fishing and/or hunting license until a valid Virginia DMV driver's license or identification card is obtained.

Please note: This form is only valid four (4) months from the date of signature.