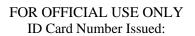


## COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

**OFFICE OF THE MAYOR** 

Municipality of Saipan CTC Building, Teer Drive, Oleai P.O. Box 501457, Saipan, MP 96950 Tel: (670)234-6208 Fax: (670)234-1190



| Under 18 years of age           | \$7.00  |
|---------------------------------|---------|
| $\square$ 18 to 54 years of age | \$15.00 |
| $\Box$ 55 years of age or older | \$7.00  |
| Disabled                        | \$7.00  |

David M. Apatang Mayor of Saipan

## **IDENTIFICATION CARD APPLICATION FORM**

## Municipal Identification requirements:

- 1. Must be a resident of Saipan and Northern Islands, U.S. Citizen or a Citizen of the Federated States of Micronesia,
- Republic of the Marshall Islands, Republic of Palau or a Permanent Resident.
- 2. Certified copy of birth certificate, valid passport, voter's registration card or permanent resident card.

| Last   |                | F           | ïrst                         | Middle            |  |  |
|--|----------------|-------------|------------------------------|-------------------|--|--|
| Mr.  |                |             |                              |                   |  |  |
| Ms.  |                |             |                              |                   |  |  |
| Mrs.   |                |             |                              |                   |  |  |
| Mailing Address (not e-mail address): Street Address No. |                |             |                              |                   |  |  |
| Permanent Residence:                                     |                |             |                              |                   |  |  |
| Village in Saipan:                                       |                |             | Street Name:                 |                   |  |  |
| Island Residing:   |                |             |                              |                   |  |  |
| Date of Birth (MM/DD/YY)                                 | Place of Birth | :           |                              | Sex: Citizenship: |  |  |
| Color of Eyes:   | Height:        | Weight:     | Color of Hair:               | □ Female          | Ethnicity:                                 |  |
| Home Telephone   | Work Telepho   | one         |                              |                   |  |  |
|  |                |             |                              |                   |  |  |
|  | Signature of   | Applicant   | Date                         |                   |  |  |
|  |                | FOR OFFIC   | CIAL USE ONLY                |                   |  |  |
| APPLICATION REVIEWED AN                                  | ND FOUND TO BI | E IN ORDER. | Finance Rec<br>Date of Issue |                   |  |  |
| Fiscal & Budget Offic                                    | cer            | Date        | _                            |                   | LIST<br>Certificate<br>Passport            |  |
| David M. Apatang, Mayo                                   | or of Saipan   | Date        |                              | □ Voter           | r's Registration Card<br>nanent Green Card |  |