



To schedule an appointment for an ID card, call (908) 753-3222

# Plainfield Municipal ID Application

## CARD APPLICATION TYPE & FEES (check one)

<input type="checkbox"/> New Applicant (ADULT 18+) \$15	<input type="checkbox"/> New Applicant (SENIOR 55+) \$5
<input type="checkbox"/> Lost/Stolen/Damaged Card \$10	<input type="checkbox"/> New Applicant (CHILD 12-17) \$5

## APPLICANT INFORMATION

1. FIRST NAME \_\_\_\_\_ 2. MIDDLE INITIAL \_\_\_\_\_

3. LAST NAME \_\_\_\_\_

4. DATE OF BIRTH (mm/dd/yyyy) \_\_\_\_/\_\_\_\_/\_\_\_\_

5. GENDER  MALE  FEMALE  NOT DESIGNATED

6. HEIGHT \_\_\_\_\_ Feet \_\_\_\_\_ Inches 7. EYE COLOR \_\_\_\_\_

8. HOME ADDRESS \_\_\_\_\_ APT # \_\_\_\_\_

CITY: PLAINFIELD STATE: NJ ZIP CODE \_\_\_\_\_

9. HOME PHONE (\_\_\_\_) \_\_\_\_\_

10. CELL PHONE (\_\_\_\_) \_\_\_\_\_

11. EMAIL \_\_\_\_\_

## "CARE ADDRESS" Authorized use of address by City agency, hospital, private or public shelter, nonprofit organization, or religious institution in Plainfield serving homeless individuals or survivors of domestic violence

12. Is the above address a Care of Address?  YES  NO

12a. If yes, please provide name of the Care Organization \_\_\_\_\_

## CERTIFICATION

**13. CERTIFICATION:** I affirm that I live in the City of Plainfield, NJ; I am at least 12 years of age and all documents submitted and statements made on this application are true to the best of my knowledge. I certify that by signing this application I agree to an inquiry conducted by the City of Plainfield, NJ to verify and confirm the information that I have submitted. I also acknowledge that submission of false documents to obtain a Plainfield Municipal Identification Card is a violation of N.J.S.A. 2C: 21-2.1(c) and making false statements to obtain a Plainfield Municipal Identification Card (PMIC) is a violation of N.J.S.A. 2C: 21- 4 and punishable by law.

\_\_\_\_\_  
SIGNATURE OF APPLICANT                      DATE                      GUARDIAN (if applicable)

## EMERGENCY CONTACT (Optional) / GUARDIAN (if child)

*Please be advised that your emergency contact information will be made visible on ID card*

Emergency Contact Name:	Relationship to applicant:
Emergency Contact Home Phone:	Emergency Contact Cell Phone:

**Approval of the Plainfield Municipal ID application is conditional on approval of legitimacy of documents submitted.**

### FOR OFFICE USE ONLY – DO NOT fill out the section below

Card Issue Date:                      /                      /	Card Expiration Date:                      /                      /
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# Plainfield Municipal ID Application

As a City of Plainfield Municipal Identification cardholder, I understand that:

- The Plainfield Municipal ID Card (PMIC) is solely used by residents of the City of Plainfield.
- The PMIC is issued to assist in the identification of the valid cardholder for the purposes of obtaining services from the City of Plainfield and at the discretion of businesses within the City of Plainfield.
- The PMIC is non-transferable.
- Altering or intentionally damaging the PMIC, using another person's card, or allowing the cardholder's PMIC to be used by another person may result in confiscation of the card and violation of N.J.S.A. 2C: 28-7.
- The cardholder is responsible for paying any replacement fee when a PMIC is lost, stolen, confiscated, or intentionally damaged, or when any information is changed at cardholder's request.
- Cardholder should notify the City of Plainfield immediately if a card is lost or stolen.
- Relocation out of the City of Plainfield invalidates the card and shall be returned to the City for destruction. Any use in violation shall forfeit any application of the PMIC.
- Minimum age request is 12 year of age.
- The PMIC card is valid for a term of 2 years from date of issuance.

*All applicants must meet the following criteria to apply for the Plainfield Municipal ID Card. Upon arrival at the enrollment site, the applicant will be handed the Plainfield ID application. Applicant must have one or more documents from each category listed below. Once application is completed, a staff member shall review all documents received from applicant for accuracy.*

- New Application (Adult) \$15
- New Application (Senior/Child) \$5
- Lost, Stolen or Damaged Card \$10
- If applicants are unable to pay the \$15 fee, then a financial Hardship Affidavit must be attached with the application for review.

## VALIDATION AND VERIFICATION PROCESS

- Requires at least one (1) or more document showing proof of identity and one (1) or more document showing proof of residency
- All documents must be the original, current, and unexpired

Proof of Identification	Proof of Residency
<ul style="list-style-type: none"> <li>• Consular ID card with photograph</li> <li>• Visa or U.S. Work Permit (current)</li> <li>• National identification card (must have photo, name, address, date of birth and expiration date)</li> <li>• Birth Certificate (U.S. or Foreign)</li> <li>• US Permanent Resident card (Green Card)</li> <li>• U.S. Citizenship and Naturalization Certificate</li> <li>• U.S. Federal Government or Tribal issued photo ID</li> <li>• State Veterans ID with photo</li> <li>• Temporary Protected Status (TPS) card with photo</li> <li>• Military identification card (U.S. or Foreign)</li> <li>• Passport (U.S. or Foreign)</li> <li>• Driver's license (U.S. or Foreign)</li> <li>• Prisoner ID card/Face Sheet (formerly incarcerated released form)</li> <li>• ITIN card (must be accompanied by an ID with a photograph)</li> <li>• Social Security card</li> <li>• Electronic Benefit Transfer (EBT) card</li> <li>• Voter registration card</li> </ul>	<ul style="list-style-type: none"> <li>• Utility bill</li> <li>• Current residential lease</li> <li>• Mortgage payment receipt or local property tax statement</li> <li>• Bank account statement</li> <li>• Proof that the applicant has a minor child currently enrolled in a school located within the city</li> <li>• Employment pay stub</li> <li>• Jury summons or court order issued by a state or federal court</li> <li>• Federal or state income tax or refund statement</li> <li>• Insurance bill (homeowner, renter, health, life, or automobile insurance)</li> <li>• Written verification issued by a homeless shelter that receives city funding confirming residency</li> <li>• Written verification from a hospital, health clinic or social services agency that receives city funding, confirming residency</li> </ul>