



CITY OF
HAYWARD
HEART OF THE BAY

CERTIFICATE OF RESIDENCE

On this date, (date), (name of individual) came into the City Clerk's Office of the City of Hayward, in the County of Alameda, State of California, United States of America, and before me, Miriam Lens, City Clerk of the City of Hayward, presented himself (or herself) in good physical and mental condition. (Name of individual, (date of birth: _____), provided the following type of identification: (e.g., California Driver's License No. _____, with an expiration date of _____), as proof of identification and (any other document presented).

(Name of individual) also presented, e.g., property tax record or mortgage statement identifying himself (or herself) as property owner of (address), Hayward, California, (zip code), dated (date); or (other item such as utility statement, etc.), verifying residency.

Signature: _____
(Typed Name of Individual)

Attest: _____
Miriam Lens, City Clerk
City of Hayward

Date: _____

OFFICE OF THE CITY CLERK

777 B STREET, HAYWARD, CA 94541-5007

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