

Identity Verification Form

Upon request, this form must be completed to validate an individual's identity in connection with establishing or maintaining an electric account with APS.

Section I To be completed by the Applicant.

I, _____, the undersigned, do hereby state and declare the following:
This affidavit concerns electric service at the following service location:

Address: _____ Phone: _____

City: _____ State: _____ Zip: _____

Section II Must be completed by the Applicant, but in the presence of a Notary.

(Visit www.123notary.com for a list of notaries.)

I, _____, the undersigned, do hereby state and declare the following: The ID provided below belongs to the undersigned and the undersigned alone. This ID will be used to identify the individual responsible for the maintenance and financial obligations associated with the electric account for the above location.

ID Type (check one):

- | | |
|--|--|
| <input type="checkbox"/> Driver's License (any state or country) | <input type="checkbox"/> State issued ID (any state) |
| <input type="checkbox"/> U.S. or Foreign Military ID | <input type="checkbox"/> Passport |
| <input type="checkbox"/> U.S. Tribal ID with photo | <input type="checkbox"/> Employee ID with photo |
| <input type="checkbox"/> GreenCard | <input type="checkbox"/> Welfare ID with photo |

Section III To be completed by the Notary.

State: _____ County: _____

I do hereby certify that _____ personally appeared before me this day and is known to me (or has satisfactorily proven) to be the person whose name is shown on the ID described in Section II, and acknowledged that he/she provided the ID for the purpose described in Section I.

WITNESS my hand and official seal this _____ day of _____ in the year of 20 _____.

Notary Signature: _____ My Commission expires: _____