STATE OF ALASKA
DIVISION OF MOTOR VEHICLES

SENIOR CITIZEN REGISTRATION EXEMPT AFFIDAVIT

Alaska License Plate Number		Serial Number (VIN)		
Year	Make	Model	Body Style	Color

I, _____, am an Alaskan resident 65 years of age or older and am applying for an exemption for one motor vehicle subject to registration. I am the registered owner, either solely or jointly, of the vehicle described above. I have no other vehicles registered with the senior citizen or the disability exemption per AS 28.10.411.

Date of Birth	Alaska Driver License or Alaska state ID number

If your address has changed please update.

Mailing Address	City	State	ZIP
Physical Address	City	State	ZIP

I have personally reviewed the information on this application and certify under penalty of perjury that to the best of my knowledge and belief the information on this application is true and correct.

Signature	Date	(SEAL)
Subscribed And Sworn To Before Me This _____ day of _____ , 20_____ Month Year		
Notary or DMV Representative	Commission Expiration	

Additional Information:

- Only one exemption is allowed per individual

Items required:

- Senior Citizen Registration Exempt Affidavit (807)
- A copy of the last registration issued, if available

If you do not live in an area with access to a DMV, you may mail the items to:

Submit to Alaska DMV:
Attn: Correspondence Department
4001 Ingra Street, Suite 101
Anchorage, AK 99503
Phone: 907-269-5551