

Case Name: _____
Case ID: _____
Worker #: _____

_____ County Department of Social Services

North Carolina Residency Declaration

This form is used to verify that, _____, is a
(Applicant(s) Name)
resident of North Carolina and resides at _____.
(Physical Address)

I have personal knowledge that the above-named:

- Intends to live in North Carolina permanently.
- Intends to remain in North Carolina for an indefinite period of time.
- Entered North Carolina in order to seek employment.
- Entered North Carolina with a job commitment.

I hereby declare that the above information is true and accurate.

Signature

Relationship

Date

Address: _____

Telephone No.: _____