

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 (Check One):

- 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: _____

Telephone No: _____

Address: _____

