



JOHNSON COUNTY, IOWA COMMUNITY ID APPLICATION

ADMINISTRATION

913 South Dubuque St.
Iowa City, IA 52240

319-356-6004 Auditor's Office

Applicant Information

Full Name: _____

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Phone: () _____ Date of Birth: _____

**PROOF OF IDENTIFICATION
- current and not expired -**

ONE of the following

- U.S. or foreign Passport
- U.S. Driver's license
- U.S. State non-driver's ID card
- U.S. Permanent resident card (*Green card*)
- Consular ID (*CID*)
- Johnson County Community ID (*renewals only*)
- Birth certificate (*persons 16 years old and under only*)

Or TWO of the following

- National ID card (*must include photo, name, address, date of birth and expiration date*)
- Foreign driver's license
- Voter registration card (*must be presented with original birth certificate*)
- U.S. or foreign military ID card (*must be presented with original birth certificate*)
- Visa
- U.S. Individual taxpayer identification number (ITIN) card (*must be accompanied by identification with a photograph*)
- Identification card issued by Iowa education institution, including elementary, middle, secondary or post-secondary schools
- Certified copy of US or foreign birth certificate
- Social Security card
- Official medical record w/birth date (*persons 13 years old and under only*)
- Official school record w/birth date (*persons 13 years old and under only*)

-----Office Use Only-----

- Other county, state, federal, or foreign government-issued document (*must include name, date of birth, and photo*)

Describe: _____

PROOF OF RESIDENCY

- Utility bill with name and address (*dated within the last 30 days*)
- Insurance bill, such as homeowner's, renter's, health, life, or automobile (*dated within the last 30 days*)
- Medical bill (*dated within last 30 days*)
- Bank statement (*dated within the last 30 days*)
- Employment pay stub (*dated within the last 30 days*)
- Local property tax statement (*dated for present year*)
- Mortgage payment receipt (*dated within the last 30 days*)
- Proof of minor enrolled in public or private school within Johnson County
- Voter registration card
- Original documents from health or social services organization attesting to at least fifteen days Johnson County residency (*dated within the last 30 days*)
- Jury summons or court order issued by a state or federal court (*dated within the last 30 days*)
- Federal or state income tax or refund statement (*dated for the present year*)
- Current rental agreement
- Current mobile home lot payment receipt
- Current Johnson County vehicle registration

-----Office Use Only-----

- Other county, state, or federal government-issued document (*dated within the last 30 days*)

Describe: _____

TURN OVER

Optional Information on back of ID

Emergency Contact Information: _____

Allergy Information: _____

I understand that the Community ID may not be used to vote, drive, obtain vital records, or as proof of age for purchasing alcohol or tobacco or entering age-restricted establishments, or for other services restricted by state or federal law to citizens of the U.S. This card is only valid in Johnson County. This identification card is valid for four years for adults, and two years for children. I swear and/or attest that I reside in Johnson County, Iowa and that I am the person listed in the documents I am submitting. The documents are true and accurate and I make this statement under penalty of perjury. **If parent is submitting document for a minor child:** I swear and/or attest that the applicant is my child and resides in Johnson County, Iowa and is the person listed in the documents I am submitting.

Signature: _____ **Date:** _____

Guardian Signature (If applicant is under 18): _____

-----**FOR OFFICE USE ONLY**-----

ID ISSUED by _____ on _____ .
Staff name Date

ID#: _____

Type of document verified for:

Proof of Identification _____

Proof of Identification (if secondary was needed) _____

Proof of Residency _____

Fee collected: _____ \$8/adult _____ \$4/child

Cash: _____ **Receipt #:** _____ (Receipt book in cash drawer.)

Check: _____ (Make check payable to "Johnson County Treasurer.")

Did a County employee assist with language interpretation? YES NO

IF YES, who/from where: _____

ID PRINTED by _____ on _____ .
Staff name Date

ID, LETTER, BROCHURE, AND BUSINESS INFORMATION MAILED

by _____ on _____ .
Staff name Date