



NONRESIDENT MILITARY (NRM) EXEMPTION STATEMENT

SIDE A – U.S. SERVICEMEMBER USE ONLY (50 U.S.C. §§568, 571, 595)

(NATO MEMBERS – SEE FORM REG 5046)

VEHICLE IDENTIFICATION NUMBER	MAKE OF VEHICLE	VEHICLE LICENSE NUMBER
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You qualify for this exemption if your duty station is located in California and your vehicle is not used in a trade or business.

I am on active duty in the U.S. Uniformed Services with the _____ .
BRANCH OF SERVICE

I am now stationed at _____ , California with the _____ .
DUTY STATION UNIT

This can be verified by my commanding officer, who can be reached at (_____) _____ .
TELEPHONE NUMBER

I am not a resident of California, my legal residence is _____ .
STATE

NOTE: NRM exemption not applicable to California residents.

This vehicle is garaged primarily in the county of _____ .
COUNTY

Military Identification Verified _____ .
OFFICE DATE ID # DMV EMPLOYEE INITIALS

THE INFORMATION YOU ARE PROVIDING IS SUBJECT TO DEPARTMENT OF DEFENSE VERIFICATION AND DMV AUDIT.

EXECUTED ON (DATE)	AT (CITY)	STATE
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I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT TRUE FULL NAME	SIGNATURE X	DAYTIME TELEPHONE NUMBER ()
MAILING ADDRESS	CITY	STATE ZIP CODE



NONRESIDENT MILITARY EXEMPTION (NRM) STATEMENT

SIDE B – U.S. SERVICEMEMBER SPOUSE USE ONLY (50 U.S.C. §§568, 571, 595)

VEHICLE IDENTIFICATION NUMBER	MAKE OF VEHICLE	VEHICLE LICENSE NUMBER
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To qualify for this exemption, your spouse's duty station must be located in California and this vehicle must not be used in a trade or business.

My spouse _____ is on active duty in the U.S. Uniformed Services with the _____.

SPOUSE'S NAME

BRANCH OF SERVICE

My spouse is now stationed at _____, California with the _____.

DUTY STATION

UNIT

This can be verified by my spouse's commanding officer, who can be reached at (_____) _____.

TELEPHONE NUMBER

My spouse and I are not residents of California, my spouse's legal residence is _____.

STATE

and my legal residence is _____ . **NOTE:** NRM exemption not applicable to California residents.

STATE

This vehicle is garaged primarily in the county of _____.

COUNTY

Applicant's Military Identification Verified _____.

OFFICE

DATE

ID #

DMV EMPLOYEE INITIALS

THE INFORMATION YOU ARE PROVIDING IS SUBJECT TO DEPARTMENT OF DEFENSE VERIFICATION AND DMV AUDIT.

EXECUTED ON (DATE)	AT (CITY)	STATE
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I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

PRINT TRUE FULL NAME	SIGNATURE X	DAYTIME TELEPHONE NUMBER ()	
MAILING ADDRESS	CITY	STATE	ZIP CODE