

Union City Municipal Identification Card Program

- The Mayor and Board of Commissioners recognize what many residents do to access various services such as (bank accounts, health care, access to services in public and government buildings, etc.; services that are extremely difficult to obtain without appropriate identification.
- Municipal IDs will help residents (ages 14 and older) obtain services and will prove to be a benefit to Union City residents.
- Residents may obtain identification by showing proof of address and ID at the City Clerk's Office **(Monday to Thursday from 8:30 a.m. to 4:00 p.m./ Friday 9:00 a.m to 4:00 p.m.)**
- Identifications are available to all Residents regardless of their Immigration Status.
- Identification will include **your name, address, date of birth, photograph, signature, issue date, and expiration date.**
- Identification is free.
- If any fraud is committed: your fine will be more than \$1,000.00, 90 days in prison or community service.

Required documentation:

- U.S. Passport / Foreign
- U.S./Foreign Driver's License
- U.S./Foreign Identification Card
- U.S. Permanent residence
- Consular Identification
- U.S. Military Identity
- Social Security Letter
- Birth certificate
- Home lease
- Public service's bill
- Bank account
- Tax Declaration
- Proof of Child Enrollment in Union City Schools
- Check receipts/ Medical insurance Letter



ID CITY OF UNION CITY

Municipal Identification Request

OFFICIAL USE ONLY

Application Date:

Initials:

Evidence Presented:

REQUEST TYPE - SELECT ONE

- New card
- Change of card information (you must bring your outdated Union City ID card to the city clerk's office to change name or address).
- Lost/Stolen/Damaged Card (Replacements for lost, stolen, or damaged cards are only available at the City Clerk's Office.

APPLICATION INFORMATION

First Name

Middle Name/Initial

Last name

Address

Aparment number

City

State

Zip Code

| | | |
|---|--|---|
| ¿ Is the address where you live a refuge address? Yes <input type="radio"/> No <input type="radio"/> <small>Only an option for applicants who are homeless or survivors of domestic abuse</small> | | Check this box only if you do not have a home address or are a survivor of domestic violence, AND you do not have a custodial address. You will pick up your card at the center where you requested it. |
| Phone | | Email address: |
| Gender | Male <input type="radio"/> Female <input type="radio"/> not designated <input type="radio"/> | Birthdate: |
| Eye color: | Height: | |

Certification: I affirm that I live in the City of Union City; I am at least 14 years of age; and all documents submitted and statements made in this application are true to the best of my knowledge and belief. I certify that by signing this application I agree to an investigation conducted by the City of Union City to verify or confirm the information I have submitted. If I previously applied for and received a COUC municipal identification card, I certify that the original card was expired, lost, stolen or damaged.

Signature of the applicant

Date

Caregiver signature (if applicable)

Emergency contact

Designate an emergency contact on the card:

First name , Last name

Phone

Approval of the City of Union City ID application is conditioned upon approval of the sufficiency and legitimacy of the documents submitted.