

LICENSING ELIGIBILITY REQUIREMENT

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LICENSING © 602-364-4457 🖂 insurancelicensing@difi.az.gov								
This form should only be submitted with a paper application form.								
LAST NAME			FIRST NAME		MIDDLE NAME			
BUSINESS ADDRESS (AS SHOWN ON LICENSE OR			APPLICATION)	CITY		STATE	ZIP CODE	
Complete this form and include a copy of the indicated document. Provide only one of the following forms of identification (check the box next to the one you are submitting):								
1.		An Arizona driver license issued after 1996 or an Arizona non-operating identification license.						
2.		A driver license issued by a state that verifies lawful presence in the United States. (Licenses from IL, NM, UT, and WA are not acceptable).						
3.		A birth certificate or delayed birth certificate issued by any state, territory or possession of the United States.						
4.		A United States certificate of birth abroad.						
5.		A United States passport.						
6.		A foreign passport with a United States visa.						
7.		A Form I-94 with a photograph.						
8.		A United States citizenship and immigration services employment authorization document or refugee travel document.						
9.		A United States certificate of naturalization.						
10.		A United States certificate of citizenship.						
11.		A tribal certificate of Indian blood.						
12.		A tribal or Bureau of Indian affairs affidavit of birth.						
13.	Any other license that is issued by the federal government, any other state government, an agency of this state of a political subdivision of this state that requires proof of citizenship or lawful alien status before issuing the license.							
By my signature below, I hereby certify, under penalty of perjury that the copy of the document I am providing is a true and accurate copy of the original document and that I am legally authorized to be present in the United States. FULL SIGNATURE OF LICENSEE DATE								

Page 1 of 1 FORM L-152 20220601