

COUNTY OF KAUAI  
 DIVISION OF MOTOR VEHICLE & LICENSING  
 4444 Rice Street, Suite # 466, Lihue, Hawaii 96766  
**NON- RESIDENT CERTIFICATE**

I hereby certify that I am a member of the U.S. Armed Forces on active duty in the State of Hawaii, that I am a legal resident of the State of \_\_\_\_\_;

That my military organization is \_\_\_\_\_;

and that the motor vehicle described below for which application for registration is being made is located in the County of Kauai, State of Hawaii.

DESCRIPTION OF MOTOR VEHICLE:

License No.: \_\_\_\_\_ Type: \_\_\_\_\_  
 Make: \_\_\_\_\_ VIN: \_\_\_\_\_

Printed Name Service Member	Rank and Branch of Service
Signature	Date

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Certificate

This is to certify that the service record of the above mentioned service personnel indicates that his legal residence is as indicated above. His tour of duty will end on \_\_\_\_\_:

Printed Name of Unit Commander or Designee	Rank and Branch of Service
Signature	Date