



## Agricultural Permit Signature Form for Minors

Custodial parents/legal guardians use this form to certify a minor can safely operate a motor vehicle for agricultural work.

Name of applicant ( <i>Last, First, Middle</i> )		
Residence Address		
City	State	ZIP code

I certify that I am the  custodial parent  legal guardian of the applicant named above and that this person is qualified to safely operate a motor vehicle in agricultural work. I further certify that I shall use every effort to see that this permit is used solely for the purpose for which it is issued.

\_\_\_\_\_  
**PRINT** or **TYPE** Name of parent/guardian

\_\_\_\_\_  
Driver license or ID card number State

**X** \_\_\_\_\_  
Signature of parent/guardian Date

### Notarization / Certification

State of Washington, County of \_\_\_\_\_

Signed or attested before me on \_\_\_\_\_ by \_\_\_\_\_

(Seal or stamp)

**X** \_\_\_\_\_  
Signature of notary public or licensing services representative

\_\_\_\_\_  
Printed or stamped name of notary public or licensing service representative

\_\_\_\_\_ and \_\_\_\_\_  
Title Driver licensing office number or notary expiration date

It is a misdemeanor for any person to use a false or fictitious name in any application or to knowingly conceal a material fact or otherwise commit a fraud in any such application. A violation of this provision of the laws may result in suspension of the driving privilege of those involved. RCW 46.20.336