

**STATE OF ALASKA  
DIVISION OF MOTOR VEHICLES  
CERTIFICATE OF ACCURACY OF TRANSLATION**

I, \_\_\_\_\_, attest to my competency to translate  
(NAME OF TRANSLATOR)

from \_\_\_\_\_ to English, and I certify I have translated the attached document.  
(FOREIGN LANGUAGE)

The attached translation is the correct English translation of all pertinent information from the original  
\_\_\_\_\_ for \_\_\_\_\_.  
(DOCUMENT TYPE) (LEGAL NAME OF APPLICANT)

**The following must be completed by the person who translated the document(s):**

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\_\_\_\_\_  
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\_\_\_\_\_  
DATE

**NOTE: The translator and the applicant cannot be the same person.**