

Appendix 5



SEX OFFENDER REGISTRATION AND NOTIFICATION  
ACT OF 2013 34-A M.R.S. §§11271 - 11304

NOTICE OF CHANGE OF INFORMATION REPORT  
FOR REGISTRANTS CONVICTED  
ON OR AFTER JANUARY 1, 2013  
AND

DATE OF OFFENSE MUST BE ON OR AFTER JANUARY 1, 2013

TO: State Bureau of Identification, Sex Offender Registry, 42 State House Station, Augusta, ME  
04333-0042

NAME (Last, First, Middle): \_\_\_\_\_

DATE OF BIRTH (Year, Month, Day): \_\_\_\_\_

GENDER: (M) (F) Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Hair: \_\_\_\_\_

*ONE OR MORE OF THE FOLLOWING HAS CHANGED. CHECK OFF ALL THAT APPLY*

NEW NAME CHANGE: \_\_\_\_\_

PROBATION OFFICER'S NAME: \_\_\_\_\_

DOMICILE (HOME)  MAILING  RESIDENCE  SCHOOL OR COLLEGE  PLACE OF  
EMPLOYMENT  
(Primary address) (Secondary address)

INTERNET IDENTIFIERS  HOME PHONE #  CELL PHONE #

DRIVER'S LICENSE: ▼ Yes ▼ No DRIVERS LIC #: \_\_\_\_\_ STATE: \_\_\_\_\_ COPY

ENCLOSED ▼ Yes ▼ No

ANY PROFESSIONAL LICENSE: ▼ Yes ▼ No COPY ENCLOSED ▼ Yes ▼ No

ANY PASSPORT/IMMIGRATION DOCUMENTS: ▼ Yes ▼ No COPY ENCLOSED ▼ Yes ▼ No

MOTOR VEHICLE INFORMATION ▼ Yes ▼ No (owned, leased or used) REGISTRATION &  
LOCATION OF VEHICLE

YEAR \_\_\_\_\_ COLOR \_\_\_\_\_ MAKE \_\_\_\_\_ MODEL \_\_\_\_\_ LICENSE PLATE #  
\_\_\_\_\_

LOCATION OF VEHICLE (physical address): \_\_\_\_\_

(Lease means a transfer of the right to possession and use of a motor vehicle for a term of 30 days or more in return for consideration.)

**YOU MUST COMPLETE INFORMATION FOR EACH BOX YOU CHECKED OFF ABOVE.**

**NEW DOMICILE (Home) ADDRESS (Primary Physical Location):** \_\_\_\_\_

**HOME PHONE #** \_\_\_\_\_ **CELL PHONE #** \_\_\_\_\_

**INTERNET IDENTIFIERS** (email addresses, other designations used for self-identification or routing in Internet communication or postings): \_\_\_\_\_

**NEW MAILING ADDRESS:** \_\_\_\_\_

**RESIDENCE ADDRESSES (Secondary Physical Address, other than Domicile):** \_\_\_\_\_

**PLACE OF EMPLOYMENT (NAME AND PHYSICAL LOCATION):** \_\_\_\_\_

**PLACE OF SCHOOL OR COLLEGE (NAME AND PHYSICAL LOCATION):** \_\_\_\_\_

**6. TEMPORARY LODGING ADDRESSES AND DATES OF TRAVEL PRIOR TO 21 DAYS BEFORE TRAVELING BEYOND THE JURISDICTION OF THE UNITED STATES (if applicable):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**I UNDERSTAND THAT MAKING A FALSE STATEMENT THAT I DO NOT BELIEVE TO BE TRUE ON THIS FORM CONSTITUTES A CRIMINAL OFFENSE, AND MAY BE PROSECUTED AS UNSWORN FALSIFICATION PURSUANT TO 17-A M.R.S. §453 (CLASS D)**

**I UNDERSTAND THAT CHANGES IN INFORMATION MUST BE REPORTED IN WRITING TO THE MAINE STATE POLICE, MAINE STATE BUREAU OF IDENTIFICATION, WITHIN 3 DAYS. I MUST ALSO NOTIFY THE LAW ENFORCEMENT AGENCY HAVING JURISDICTION WITHIN 24 HOURS. I UNDERSTAND IF I MOVE TO ANOTHER STATE, I MUST REGISTER THE NEW ADDRESS WITH THE MAINE STATE BUREAU OF IDENTIFICATION. IF THE NEW STATE HAS A REGISTRATION REQUIREMENT, I MUST REGISTER WITH THE DESIGNATED LAW ENFORCEMENT AGENCY IN THE NEW STATE NOT LATER THAN 3 DAYS AFTER ESTABLISHING RESIDENCE IN THAT STATE OR AS REQUIRED BY THAT STATE'S LAW.**

**REGISTRANT SIGNATURE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_