



LICENSE PLATE APPLICATION

Purpose: Use this form to request souvenir, standard, personalized or special license plates.

Instructions: Review the Additional Information Section on the back of this form. Mail completed form, with the appropriate fees, to DMV at the address above. Or, you may apply online at www.dmvNOW.com or at any DMV Customer Service Center or DMV Select office.

| APPLICATION TYPE (check one) | | | |
|---|--|---|--|
| <input type="checkbox"/> VEHICLE LICENSE PLATES | <input type="checkbox"/> VEHICLE LICENSE PLATES - DISABLED | <input type="checkbox"/> SOUVENIR LICENSE PLATE | <input checked="" type="checkbox"/> TRANSFER EXISTING LICENSE PLATES |

| LICENSE PLATE TYPE REQUESTED (check one) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|--|--|--|--|--|--|--|--|--|-----|--|--|--|--|--|--|--|--|--|-----|--|--|--|--|--|--|--|--|--|-----|--|--|--|--|--|--|--|--|--|--|------------------|-----|----|
| <input type="checkbox"/> STANDARD | <input type="checkbox"/> LIGHTHOUSE <input type="checkbox"/> HERITAGE (Dogwood-Cardinal) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SCENIC (pick one) <input type="checkbox"/> AUTUMN <input type="checkbox"/> MOUNTAIN TO SEASHORE <input type="checkbox"/> PATRIOT | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> COLLEGE: _____ Locality: <input type="checkbox"/> City <input type="checkbox"/> County _____ <small>(No initials or abbreviations)</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> MILITARY: _____ <input checked="" type="checkbox"/> SPECIAL INTEREST: E Pluribus Unum, LLC <small>(No initials or abbreviations) (Organization Name - If organization has more than one license plate, specify design type)</small> | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> CLEAN FUEL _____ <input checked="" type="checkbox"/> OTHER E Pluribus Unum <small>Vehicle Year Make Model (Any plate not listed above)</small> (Review the Clean Special Fuel License Plates section on the reverse side of this form.) (Note: some plates require certification) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> PERSONALIZED LICENSE PLATES: To request a personalized vehicle or souvenir plate, review the Personalized License Plates Policy on the reverse side of this form. Check this box and enter your choices below. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| PERSONALIZED LICENSE PLATE CHOICES <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 20px;">1st</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>2nd</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>3rd</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> <tr><td>4th</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr> </table> | 1st | | | | | | | | | | 2nd | | | | | | | | | | 3rd | | | | | | | | | | 4th | | | | | | | | | | DMV USE ONLY <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="height: 20px;">AVAILABLE CHOICE</td></tr> <tr><td style="height: 20px;">FEE</td></tr> <tr><td style="text-align: center;">\$</td></tr> </table> | AVAILABLE CHOICE | FEE | \$ |
| 1st | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2nd | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3rd | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4th | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| AVAILABLE CHOICE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| \$ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

| APPLICANT INFORMATION | | | |
|-------------------------|------------|-------------------------------|------------------------------------|
| OWNER'S NAME (last) | (first) | (mi) | DAYTIME TELEPHONE NUMBER () |
| CO-OWNER'S NAME (last) | (first) | (mi) | DAYTIME TELEPHONE NUMBER () |
| CURRENT MAILING ADDRESS | | CITY | STATE ZIP |
| CURRENT PLATE NUMBER | PLATE TYPE | | PLATE EXPIRATION DATE |
| VEHICLE TITLE NUMBER | | VEHICLE IDENTIFICATION NUMBER | |

| CERTIFICATION/SIGNATURES | |
|---|-------------------|
| <input type="checkbox"/> This vehicle is insured with liability coverage by a company licensed to do business in Virginia. Coverage must be in effect at the time of application and must remain in effect as long as the vehicle is registered, even if the vehicle is not driven or is inoperable. | |
| <input type="checkbox"/> This vehicle is not insured; therefore, I am remitting the applicable uninsured motor vehicle fee. This fee provides NO insurance coverage. Failure to comply with Virginia's insurance requirements will result in suspension of your driver's license and vehicle license plates. | |
| I/We further certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/We make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation. | |
| For a corporation, an authorized representative must sign. | |
| OWNER'S SIGNATURE | DATE (mm/dd/yyyy) |
| CO-OWNER'S SIGNATURE | DATE (mm/dd/yyyy) |