



pennsylvania
DEPARTMENT OF TRANSPORTATION
www.dmv.pa.gov

APPLICATION FOR SPECIAL ORGANIZATION REGISTRATION PLATE

(PLEASE ALLOW 4-6 WEEKS FOR DELIVERY)

For Department Use Only

Bureau of Motor Vehicles • PO Box 68266 • Harrisburg, PA 17106-8266

A VEHICLE DESCRIPTION AND APPLICANT INFORMATION - Complete this section exactly as information appears on current registration card.															
Title Number			Registration Plate Number			Expiration Date		Make of Vehicle		Year					
Last Name (or Full Business Name)			First Name	Middle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth		Telephone Home () _____ Office () _____							
Street Address - Must list a street address. P.O. Box # alone is not acceptable.					City		State	Zip Code							
NOTE: In conjunction with replacement of your registration plate, you will receive one registration card. If additional registration cards are desired, the fee is \$2 for each card. Number of Duplicate Registration Cards Requested @ \$2 each _____.															
B TO BE COMPLETED BY ORGANIZATION OFFICIAL															
NAME OF ORGANIZATION: Vietnam Veterans of America (F5)															
Name of Organization, Chapter, Post, Lodge, Employer, etc. Pennsylvania State Council, Vietnam Veterans of America, Inc.															
Street Address 809 Allison Drive					City Industry		State PA	Zip Code 15052							
C TO BE COMPLETED BY ORGANIZATION OFFICIAL - See special instructions on reverse.															
I certify that the individual named in Section A is a member in good standing of the organization listed in Section B.															
Richard Raich				Lic. Plate Co-ordinator											
NAME OF ORGANIZATION OFFICIAL				TITLE				SIGNATURE							
D OPTIONAL PERSONALIZATION REQUEST - NOTE: Additional \$104 Fee Required.															
Personalized registration plate choices may contain up to FIVE letters or numbers in combination. ONLY one hyphen or space is permitted, but not both as part of the available spaces for personalization. No other special characters are available. Please use capital letters and print clearly. Additional instructions and fees are listed on the reverse side of this application. NOTE: The shaded boxes contain a pre-printed letter configuration that is specific to this registration plate and cannot be changed. These letters will appear on your personalized registration plate.															
FIRST CHOICE			SECOND CHOICE			THIRD CHOICE									
V						V					V				
N						N					N				
E APPLICANT SIGNATURE															
I certify that all information given on this application is TRUE and CORRECT and that when I cease to be a member of the above named organization, I will immediately return the registration plate to PennDOT.															
APPLICANT'S SIGNATURE IN INK										DATE					