



APPLICATION FOR SPECIAL ORGANIZATION REGISTRATION PLATE
 (PLEASE ALLOW 4-6 WEEKS FOR DELIVERY)

For Department Use Only
 Bureau of Motor Vehicles • PO Box 68293 • Harrisburg, PA 17106-8293

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:
 Name of Organization, Chapter, Post, Lodge, Employer, etc.
The Friends of Valley Forge Park

| | | | |
|--|--------------------------------|--------------------|-------------------------------|
| Street Address 1400 North Outer Line Drive | City King of Prussia | State PA | Zip Code 19406-1009 |
|--|--------------------------------|--------------------|-------------------------------|

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.

Don Naimoli President _____
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 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
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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