MVR-27 CL REV. 09/16

> North Carolina Division of Motor Vehicles 3155 Mail Service Center Raleigh, NC 27699-3155

APPLICATION FOR A **CHOOSE LIFE**LICENSE PLATE

Remit a \$25.00/\$55.00 check or money order with this application.

□ Regular Choose Life \$25.00			Personalized Choose Life <u>\$55.00</u>			
NOTE : You are allowed	ed four (4) spaces for a person	alized	message.			
When applying for a Personalized Choos spaces for a Personalized message. The cannot conflict with another class of lice	four spaces may be a combination of					
The \$25.00/\$55.00 spec	ial fee is an (ANNUAL) fee o	due in	addition to	o the regul	ar license	fee.
Home	NAME(To agree with certificate of title) Home					
	FIRST	MI	DDLE		LAST	 Γ
AREA CODE-TELEPHONE NUMBER						
Office/Cell	ADDRESS					
AREA CODE-TELEPHONE NUMBER	CITY		STATE		ZIP CODE	
	Current North Carolina					
	Plate Number		Vehicle Identification Number			
	Driver License #		Year	Model	Make	Body Style
Owner's Certification of Liability Insurance						
I CERTIFY FOR THE MOTOR VEH	HICLE DESCRIBED ABOVE THAT I HAV	VE FINAN	ICIAL RESPON	NSIBILITY AS R	EQUIRED BY	LAW.
PRINT OR TYPE FULL	NAME OF INSURANCE COMPANY AU	THORIZE	ED IN N.C. – NO	OT AGENCY OR	GROUP	
POLICY NUMBER – IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE						
SIGNATURE OF OWNER DATE OF CERTIFICATION					ON	