APPLICATION FOR A POW/MIA SPECIALTY LICENSE PLATE

Remit a \$20.00/\$50.00 check or money order with this application.

□ Regular POW/MIA \$20.00			Personalized POW/MIA \$50.00				
NOTE: You are allowe	d four (4) spaces for a person	alized	message.			P W	
When applying for a Personalized Order only four (4) spaces for a Personalized ronly. Choice cannot conflict with another	nessage. The four spaces may be					ate. This leaves	
The \$20.00/\$50.00 speci	al fee is an (ANNUAL) fee o	lue in	addition t	o the regul	ar license	fee.	
Home	NAME (To agree with certificate of title)						
	FIRST	MI	DDLE		LAST		
AREA CODE-TELEPHONE NUMBER							
Office	ADDRESS						
AREA CODE-TELEPHONE NUMBER							
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 Lia	bility Ir	surance				
I CERTIFY FOR THE MOTOR VEH	ICLE DESCRIBED ABOVE THAT I HAV	'E FINAN	ICIAL RESPON	ISIBILITY 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 NUM	MBER – IF POLICY NOT ISSUED, NAME	E OF AGE	ENCY BINDING	G COVERAGE			
SIGNATURE OF OWNER				DATE OF CERTIFICATION			