

**UNIVERSITY OF DELAWARE LICENSE PLATE PROGRAM
STATE OF PENNSYLVANIA
GENERAL INFORMATION & PAYMENT FORM**

- Vehicle must be currently registered in the state of Pennsylvania.
- The applicant listed in Section A must be a registered owner of the vehicle as indicated on the vehicle's registration credential. If the vehicle is a leased vehicle, Form MV-1L, "Application for Lessee Information," must be completed and attached.
- No special organization registration plate will be duplicated. If your plate is lost, stolen or defaced, the Bureau of Motor Vehicles will reissue you the next available plate in the series. To apply for replacement, complete Form MV-44 and submit the required fee.
- Requests for special organization registration plates are restricted to passenger vehicles, trucks and motorhomes. Motorcycles and trailers do not qualify for special organization registration plates.
- No refund will be issued when applicant cancels request after order is placed.
- Special organization plates are issued in number sequence only and may not be personalized.
- To avoid possible problems with citations with your old registration plate, return it to: **Department of Transportation, Bureau of Motor Vehicles, Return Tag Unit, PO Box 68597, Harrisburg, PA 17106-8597**, after you have received your special organization plate.
- **The completed application and payment form with charge card information, check or money order payable to the University of Delaware in the amount of \$75 should be mailed to: [UD License Plates, Development & Alumni Relations, University of Delaware, 83 E. Main St. – 3rd Floor, Newark, DE 19716](#). This includes the **\$28** Bureau of Motor Vehicles fee. The remaining proceeds benefit Alumni Association scholarships and programs.**
- Plates will be mailed directly to the applicant from the PA DMV. *Please allow 10-12 weeks for processing.*
- Questions can be directed to Desirée Alexander at ddalex@udel.edu or 302.831.7138

PENNSYLVANIA PAYMENT FORM

_____ Enclosed is my **\$75.00 check** made payable to "University of Delaware."

_____ Please **charge \$75.00** to my: _____ VISA _____ MasterCard _____ AMEX _____ Other

Card Number: _____ CVV: _____ Expiration Date: _____

Please Print Name: _____

Email Address: _____

Billing Address: _____

Signature: _____ Daytime Phone: _____

I am an: Alum (please list class year): _____ Parent of : _____ Other: _____

How did you hear about UD plates? _____

Return bottom portion with your application.