

**UNIVERSITY OF DELAWARE LICENSE PLATE PROGRAM
STATE OF DELAWARE
INFORMATION ABOUT SPECIALTY LICENCE PLATES & PAYMENT FORM**

- The vehicle must be currently registered in the State of Delaware with a valid registration sticker. Plates will only be issued on cars, station wagons, or trucks with maximum gross weight of 10,000 pounds.
- Vehicle must be titled and registered in the name of the applicant. The title can be in more than one person's name but cannot be in a corporation or business name.
- Vehicle is authorized only one specialty plate. An applicant who currently has a special plate and is applying for a different specialty plate must indicate so on the application. No refunds will be authorized for canceling a vanity or other specialty plate.
- The specialty plate can be displayed on the front of the vehicle if the applicant wishes to display the number plate on the back of the vehicle. Customers who display their specialty plate on the back of their vehicle must keep their number tag in their vehicle.
- Plates will be mailed directly to the address on the vehicle registration unless applicant prefers to pick up the plate at one of the Division of Motor Vehicle Offices (please note this on the application). *Please allow 4-6 weeks for delivery.*
- **Submit completed application* and payment form with check, money order, or credit card payment in the amount of \$75 (includes the DMV fee of \$10 as listed on the application) to: [UD License Plates, Development & Alumni Relations, University of Delaware, 83 E Main Street, 3rd Floor, Newark, DE 19716](#). *Proceeds benefit the UD Alumni Association scholarship programs. *DO NOT SIGN the line: *Authorized Approval Appointee Signature* – for UD use only.***
- Owners wishing to transfer the specialty plate from one vehicle to another vehicle must inform the dealer or DMV when paperwork is processed.
- Questions can be directed to Desirée Alexander at ddalex@udel.edu.

DELAWARE 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/ include Maiden 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.