

STATE OF DELAWARE DEPARTMENT OF TRANSPORTATION DIVISION OF MOTOR VEHICLES

APPLICATION FOR SPECIALTY LICENSE PLATES

Organization's Name Authorized Approval Appointee Signature	
Plate Applicant Name	Date of Application
Address	
Daytime Phone #	Email
Current Vehicle Plate #	Vehicle Mfg. & Year
Is there currently any specialty or vani	ty plate on this vehicle? NO YES Plate#:
	be displayed on the vehicle described above. (If vehicle is traded, the last be presented to the Division of Motor Vehicles and a new registration
	is application. This is a one-time fee for the specialty license plate only. IV inspection and pay the yearly registration fee.
Plates may be issued only on cars, sweight.	tation wagons or trucks with not more than 10,000 lbs maximum gross
	ate per vehicle. Upon receipt of notice that the individual is no longer nich the specialty plate has been issued, the plate must be returned to the days per Title 21, Section 2139B.
Plates will be mailed to the address on one of the Division of Motor Vehicle (the vehicle registration unless applicant prefers to pick up the plate at Offices.
I do not want my plate mailed, I will p	rick it up at the below location;
Wilmington	Delaware City GeorgetownDover