

Application/Certification for Organizational License Plates

Instructions: Please complete the entire application (owner and/or co-owner). Submit appropriate fees with application (see reverse, lower right corner).								
Name of Organization:								
I certify that the individual below is a bona fide member of the above organization								
Signature of Authorized Representat	ive							
Owner's Name, First	Middle	Last	Last Driver's License Number					
Street Address	City	County	County State Zip Code					
Co-Owner's Name, First	Middle	Last	Driver's License Number					
I hereby authorize the representative of my organization to review/release my personal information for official purposes:								
Owner's Signature Co-Owner's Signature								
Year Make	Sticker No.	Title No.		Tag No.				
Vehicle Identification Number								
Insurance Co.	rance Co. Policy/Binder No.							
Organizational Member: (Check one) Owner Co-Owner Check Class: Passenger Car Multi-purpose vehicle 1 ton or less Motorcycle Fees: Organizational Tags: \$15.00 - Non-Logo \$25.00 - Logo I certify, under penalty of perjury, that the above information is true and correct to the best of my knowledge.								
Signature of Owner: Date: Date:								
MVA Use Only: New Issue	☐ Substitute ☐ Surv	viving Spouse S/	N					
Gratis Paid Approved by:Tag Issued:								
You may either Mail your application and the appropriate fees to Motor Vehicle Administration, Vehicle Registration Organization Unit 6601 Ritchie Highway N.E., Glen Burnie, MD 21062, or Visit the Motor Vehicle Administration, Glen Burnie Full Service Office, and have your plates issued to you.								



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