

**MV-904SP (11-05)**Commonwealth of Pennsylvania  
Bureau of Motor Vehicles  
Special Tag Unit  
**P.O. Box 68293**  
Harrisburg, PA 17106-8293**APPLICATION FOR  
SPECIALTY  
REGISTRATION PLATE**

▲ FOR DEPARTMENT USE ONLY ▲

<b>A VEHICLE DESCRIPTION AND APPLICANT INFORMATION</b> <i>(complete this section exactly as information appears on current registration card)</i>					
TITLE NUMBER		CURRENT REG. PLATE #	CURRENT EXPIRATION	MAKE OF VEHICLE	YEAR
LAST NAME		JR., etc.	FIRST NAME	MIDDLE INIT.	TELEPHONE NUMBER HOME ( ) _____ WORK ( ) _____
STREET ADDRESS - <b>Must list a street address. P.O. Box # alone is not acceptable.</b>			CITY	STATE	ZIP CODE
<b>In conjunction with replacement of your plate, you will receive one registration card.</b> <b>If additional registration cards are desired, the fee is \$1.50 for each card.</b>					How many extra registration cards do you want? _____
<b>B TO BE COMPLETED BY ORGANIZATION</b>					
<b>NAME OF ORGANIZATION:</b>					
NAME OF ORGANIZATION, CHAPTER, POST, LODGE, EMPLOYER, etc.				TELEPHONE NUMBER ( ) _____	
STREET ADDRESS			CITY	STATE	ZIP CODE
<b>C TO BE COMPLETED BY ORGANIZATION OFFICIAL</b> <i>(see special instructions below)</i>					
I certify that the individual named in Section A is a member in good standing of the organization listed in Section B:					
NAME OF ORGANIZATION OFFICIAL		TITLE		SIGNATURE <b>X</b> _____	
<b>D I CERTIFY THAT ALL INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND CORRECT AND THAT WHEN I CEASE TO BE A MEMBER OF THE ABOVE NAMED ORGANIZATION, I WILL IMMEDIATELY RETURN THE REGISTRATION PLATE TO THE DEPARTMENT OF TRANSPORTATION.</b>					
<b>X</b> _____			_____		
APPLICANT'S SIGNATURE IN INK			DATE		

**GENERAL INFORMATION REGARDING A SPECIALTY PLATE**

- **This application**, with Sections A and D completed in full, **must be returned to the organization official for submission to the Department.** No applications sent directly to the Department by the organization member will be processed. All applications must be sent to the Department by the organization.
- **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. (Note: Form MV-1L is available on our website at [www.dmv.state.pa.us](http://www.dmv.state.pa.us))
- Fee required with this application is \$20.00. The participating organizations may charge additional fees to offset the cost of plate production and a contribution to the organization. Please contact the organization representative for correct payment method. **DO NOT SEND CASH.**
- No specialty plate will be duplicated. If your plate is lost, stolen or defaced you will need to reapply for a specialty plate by completing this application and submitting with the appropriate fees. Should you need an immediate replacement plate, please complete and submit Form MV-44, "Application for Duplicate Registration Card, Replacement of Registration Plate, Renewal Sticker or Weight Class Sticker" and and submitting a fee of \$7.50. A standard issued plate will be issued until the replacement specialty plate can be provided. (Note: Form MV-44 is available on our website at [www.dmv.state.pa.us](http://www.dmv.state.pa.us).)
- Requests for specialty registration plates are restricted to passenger vehicles, trucks and motorhomes with a registered gross weight of not more than 9,000 lbs. **Motorcycles and trailers do not qualify for specialty registration plates.**
- **NO REFUND OF FEE** will be issued when applicant cancels request after order is placed.
- When the applicant ceases to be a member in the organization as listed in Section B, the registration plate must be returned to the Department. Complete Form MV-44 and submit a fee of \$7.50 for reissue of a regular series registration plate.
- Specialty 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, P.O. Box 68597, Harrisburg, PA 17106-8597 after you have received your special organization plate.
- Please allow 4-6 weeks for delivery.
- If applying for a Fraternal Order of Police plate, the PA State Lodge seal and the PA State Lodge Recording Secretary signature must be affixed to this application.