North Carolina Division of Motor Vehicles 3155 Mail Service Center Raleigh, NC 27697-3155

APPLICATION FOR A **DONATE LIFE**LICENSE PLATE

Remit a \$20.00/\$50.00 check or money order with this application.

| Regular Donate Life \$20.00NOTE: You are allowed four (4) spaces for a person | | □ Personalized Donate Life <u>\$50.00</u> | | | | | |
|--|---|---|-------------------------------|-----------------------|---------------|--|--|
| | | nalized message | | | D L | | |
| When applying for a Personalized Dona spaces for a Personalized message. The cannot conflict with another class of lic | ate Life license plate, the suffix DL was four spaces may be a combination of | vill be the last letters of letters and number | on the plate. s, but cannot l | be numbers | only. Choice | | |
| Home | NAME (To agree with certificate of title) | | | | | | |
| | FIRST | MIDDLE | | LAS | Γ | | |
| AREA CODE-TELEPHONE NUMBER | | | | | | | |
| Office | ADDRESS | | | | | | |
| AREA CODE-TELEPHONE NUMBER | CITY | STATE | | ZIP CODE | <u> </u> | | |
| | Current North Carolina ——————————————————————————————————— | Vehic | Vehicle Identification Number | | | | |
| | Driver License # | Year | Model | Make | Body Style | | |
| I CERTIFY FOR THE MOTOR VE | Owner's Certification of Lia | · | ISIBILITY AS R | EQUIRED BY | LAW. | | |
| PRINT OR TYPE FUL | L NAME OF INSURANCE COMPANY AU | THORIZED IN N.C. – NO | OT AGENCY OF | R GROUP | | | |
| POLICY N | UMBER – IF POLICY NOT ISSUED, NAME | E OF AGENCY BINDING | G COVERAGE | | | | |
| SIGNATURE OF OWNER | SIGNATURE OF OWNER | | | DATE OF CERTIFICATION | | | |