APPLICATION FOR A KAPPA ALPHA PSI FRATERNITY LICENSE PLATE

Remit a \$10.00/\$40.00 check or money order with this application.

○ \$10.00 <u>Regular</u> Kappa Alpha Psi

○ \$40.00 <u>Personalized</u> Kappa Alpha Psi

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NOTE: You are allowed four (4) spaces for a personalized message.

When applying for a Personalized Kappa Alpha Psi Fraternity license plate, the suffix KN will be the last letters on the plate. This leaves only four (4) spaces for a Personalized message. The requested four characters may be a combination of letters and numbers, but cannot be numbers only. Choice cannot conflict with another class of license plates.

The \$10.00/\$40.00 special fee is an (ANNUAL) fee due in addition to the regular license fee.

Home	NAME(To agree with certificate	of title)			
	FIRST	MIDDLE		LAST	
AREA CODE-TELEPHONE NUMBER					
Office	ADDRESS				
AREA CODE-TELEPHONE NUMBER	CITY	STATE		ZIP CODI	 E
	Current North Carolina				
	Plate Number	Vehicle Identification Number			
	Driver License #	Year	Model	Make	Body Style
	Owner's Certification of Lia	oility Insurance			
I CERTIFY FOR THE MOTOR VE	EHICLE DESCRIBED ABOVE THAT I HAV	E FINANCIAL RESPO	NSIBILITY AS F	REQUIRED BY	(LAW.
PRINT OR TYPE FUL	L NAME OF INSURANCE COMPANY AUT	HORIZED IN N.C. – N	OT AGENCY O	R GROUP	
POLICY N	UMBER – IF POLICY NOT ISSUED, NAME	OF AGENCY BINDIN	G COVERAGE		
SIGNATURE OF OWNER		DATE OF CERTIFICATION			