MVR-27 RHP (Rev. 12/03)

## **North Carolina Division of Motor Vehicles**

3155 Mail Service Center Raleigh, North Carolina 27699-3155

## APPLICATION FOR A **RETIRED HIGHWAY PATROL** LICENSE PLATE

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

I HEREBY CERTIFY THAT I AM A RETIRED HIGHWAY PATROL. I WOULD LIKE TO MAKE

PPLICATION FOR ONE OF	THE SPECIAL LICENS	SE PLATES.			
gned					
☐ Regular Retired Highway	Patrol <u>\$10.00</u> • Pe	ersonalized Retire	d Highway Patrol <u>\$40.00</u>		
<b>NOTE:</b> You are allowed to	Four (4) spaces for a perso	onalized message.	— — — H		
The \$10.00/\$40.00 special	fee is an (ANNUAL) fee	due in addition t	o the regular license fee.		
Home	NAME (To agree with certi	ficate of title)			
AREA CODE-TELEPHONE NUMBER	FIRST	MIDDLE	LAST		
AREA CODE-TELEPHONE NUMBER	ADDRESS				
Office		ADDRESS			
Office	CITY	STATE	ZIP CODE		
	Current North Carolina				
AREA CODE-TELEPHONE NUMBER	PLATE NUMBER	VEHICLE IDEN	TIFICATION NUMBER		
	DRIVER LICENSE #	YEAR MODEL	MAKE BODY STYLE		
(	Owner's Certification of Lia	ability Insurance			
I CERTIFY FOR THE MOTOR VEHICL	E DESCRIBED ABOVE THAT I HA	VE FINANCIAL RESPON:	SIBILITY AS REQUIRED BY LAW.		
PRINT OR TYPE F	ULL NAME OF INSURANCE COMPANY AUTI	HORIZED IN N.C. – NOT AGENCY	OR GROUP		
POLICY	NUMBER – IF POLICY NOT ISSUED, NAME	OF AGENCY BINDING COVERAG	SE		

DATE OF CERTIFICATION

SIGNATURE OF OWNER