

## APPLICATION FOR A **MILITARY RETIRED** LICENSE PLATE

**Remit a \$10.00/\$40.00 check or money order and a copy of your military ID card with this application.**

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| <input type="checkbox"/> First in Flight Background<br><input type="checkbox"/> First in Freedom Background<br><input type="checkbox"/> Regular Military Reserve <b>\$10.00</b><br><input type="checkbox"/> Personalized Military Reserve <b>\$40.00</b> | <input type="checkbox"/> U.S. Army Retired<br><input type="checkbox"/> U.S. Air Force Retired<br><input type="checkbox"/> U.S. Coast Guard Retired<br><input type="checkbox"/> U.S. Marine Corps Retired<br><input type="checkbox"/> U.S. Navy Retired |
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**NOTE:** You are allowed four (4) spaces for a personalized message.                                 

When applying for a Military Retired license plate, the prefix/suffix will be the first/last letters on the plate. This leaves only four (4) spaces for a Personalized message. The four spaces 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.**

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|--|--|--|--|
| <p><b>Home</b></p> <p>_____</p> <p>AREA CODE-TELEPHONE NUMBER</p> <p><b>Office</b></p> <p>_____</p> <p>AREA CODE-TELEPHONE NUMBER</p>                | NAME(To agree with certificate of title)<br>_____<br><div style="display: flex; justify-content: space-between; width: 100%;"> <span>FIRST</span> <span>MIDDLE</span> <span>LAST</span> </div> |  |  |
| _____<br>ADDRESS   |  |  |  |
| _____<br><div style="display: flex; justify-content: space-between; width: 100%;"> <span>CITY</span> <span>STATE</span> <span>ZIP CODE</span> </div> |  |  |  |
| <b>Current North Carolina</b><br>_____<br>Plate Number<br>_____<br>Driver License #  |  | _____<br>Vehicle Identification Number<br>_____<br><div style="display: flex; justify-content: space-between; width: 100%;"> <span>Year</span> <span>Model</span> <span>Make</span> <span>Body Style</span> </div> |  |

**Owner's Certification of Liability Insurance**

I CERTIFY FOR THE MOTOR VEHICLE DESCRIBED ABOVE THAT I HAVE FINANCIAL RESPONSIBILITY AS REQUIRED BY LAW.

\_\_\_\_\_

PRINT OR TYPE FULL NAME OF INSURANCE COMPANY AUTHORIZED IN N.C. – NOT AGENCY OR GROUP

\_\_\_\_\_

POLICY NUMBER – IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE

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SIGNATURE OF OWNER

\_\_\_\_\_

DATE OF CERTIFICATION