

APPLICATION FOR CUSTOM PLATES

This form is used to apply for custom plates that cannot be ordered on our website. For a complete list of all of our plates, pricing information, and eligibility requirements, please visit our website at dmv.ny.gov/nav/custom-plates. **If eligibility certification is required, mail it with this form.**

PLEASE PRINT INFORMATION								
Which plate are you applying for?	(Refer to the list with eligibility	and fee informati	ion on our	webs	ite dmv.ny.gov/nav/cus	tom-	plates.)	
Last Name First					Date of Birth (Month/Day/Year)			
Address (Include Street Number and Name and/or Rural Delivery Box No.) check if new Apt. # City			ity			State	Zip Code	
Signature (Sign Name in Full)					Date / /	Daytime Phone (include area code) ()		
Current Plate Number	Plate type: Passenger Commercial Motorcycle Vehic			cle Model Year	Vehicle Make			
Doyourcurrent plates have the Symbol of Access?	-	•			ew plates and you do not have 664.1, which may be printed		-	
I WOULD LIKE TO APPLY F	OR:							
☐ Standard plates (number a	ssigned by DMV)							
Personalized plates (Pass	enger Plates, Commerci	al Plates or Mo	otorcycle	e Pla	ites)			
Check our website for excombination choices. Use recall or cancel any plate	a period (.) on the line i	n the choice w	where yo	u wa	ant the space. DMV	rese	rves th	
Excelsior Plates: 1st				3rd				
Picture Plates: 1st	2	nd		_	3rd	_		
☐ Symbol of Access Reques	ted (you must qualify). If	the Symbol of	f Access	is re	equired, <u>four</u> or <u>five</u> s	рас	es are a	llowed.
IMPORTANT: Making a false deceiving or substituting in coand may also result in the restablished by the Commission continue holding these plates.	nnection with this application or suspension	cation, is a mis of the registr	sdemean ation an	or u id/or	nder Section 392 of the applicant's lice	the ense	Vehicle pursua	e and Traffic Law ant to regulations
PAYMENT METHOD:								
☐ Check ☐ Money Ord	der Make check or i	money order p	ayable to	o "C	Commissioner of Mo	tor`	Vehicle	s".
Credit Card:	Express Discover	☐ Master (Card [□∨	ïsa			
Name (as it appears on credit	card)							
Credit Card Number								
						kpira	tion Date	SecurityCode 3 or 4 digit code on the back or front of your card
Please allow 4 to 6 weeks for	delivery. If annual custo	m plate fees a	pply, the	ey wi	ill be included in you	ur re	egistrati	ion renewal.

Return this completed form, the required proof if needed, and payment to:

Department of Motor Vehicles, Custom Plates Unit, PO Box 2775, Albany, NY 12220-0775

Custom Plates Unit (518) 402-4838: M-Th 8:00am - 4:00pm