APPLICATION FOR ORGANIZATION PLATE

North Dakota Department of Transportation, Motor Vehicle Division
SFN 54397 (07-2009)

Please Print or Type

Name of Organization			
Address	City	State	Zip Code

Applicant's Legal Name			Daytime Telephone Number
Mailing Address			
Mailing Address			
City	State	Zip Code	County

Vehicle Information

Title Number
Current License Number
Vehicle Identification Number
Year & Make Of Vehicle

Personalized Plate
Requested - Maximum 5 letters & numerals.
See website for availability.

Meaning of Plate (required)

Organization Plate Fee	$	25.00
Renewal License Fee (if applicable)	$	
Personalized Plate Fee (if applicable) $25.00	$	
TOTAL FEES DUE	$	

NDCC Chapters 39-04 and 39-05

Applicant certifies this vehicle will be insured as required by law.

The applicant, under the penalties of law and as rightful owner of the vehicle described on this application, declares the information set forth on this application is correct.

X _____ _____
Applicant's Legal Signature Date

PENALTY: Any person making any false statement on this application for license or title for which another penalty is not specifically provided is guilty of a class A misdemeanor.

Mail to:
MOTOR VEHICLE DIVISION
ND DEPARTMENT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0780

Telephone (701) 328-2725
FAX (701) 328-1487
Web site: www.dot.nd.gov

The following information will not become a permanent record.

Fees may be paid by credit card. We accept Visa, Mastercard, or Discover credit cards. Please complete the following information.

Type of Card	Expiration Date
Card Number	