

DEPARTMENT USE ONLY



NAME OF APPLICANT		
MAILING ADDRESS		
CITY	STATE	ZIP CODE

**REPLACEMENT OF APPORTIONED
 REGISTRATION CREDENTIALS**

(See Instructions on Reverse Side)

LICENSE YEAR	ACCOUNT NUMBER	FLEET NUMBER
PERSON TO CONTACT		
PHONE NUMBER		

A APPLICATION FOR REPLACEMENT - (Check appropriate blocks)

Apportioned registration plate* Weight Class Decal
 Number of duplicate cab cards _____ Cab Card
 Renewal sticker only Number of duplicate cab cards _____

Reason: Lost* Stolen* Defaced Never Received

* If registration plate is lost or stolen, it must be reported to the state police or your local law enforcement office.

B VEHICLE INFORMATION

EQUIPMENT NUMBER	VIN	PA GROSS WEIGHT	PA COMBINED GROSS WEIGHT	PLATE NO.

C I certify that all information given is true and correct.

Signature _____ Date _____

D Complete only if applicant is entitled to a free issuance because original was lost in the mail and application is being made within 90 days of original issuance.

I hereby confirm that application and payment were made for apportioned registration renewal and items were never received due to loss in the mail.
 I hereby confirm that application and payment were made for the items listed in Section A for the vehicles listed in Section B and items were never received due to loss in the mail.

SUBSCRIBED AND SWORN TO BEFORE ME:	MONTH	DAY	YEAR
SIGNATURE OF PERSON ADMINISTERING OATH			

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SIGN IN PRESENCE OF NOTARY

SIGNATURE OF APPLICANT	
TITLE	DATE

INSTRUCTIONS

1. Complete the information requested at the top of the application.
2. If vehicle plates, stickers, weight decals or cab cards were never received, and application for replacement is made within 90 days from date of issue, no fee is required. Complete Sections A, B and D. **NOTE:** When the application is being submitted through an agent/messenger, a copy of applicant's photo identification must be attached.
3. If vehicle plates, stickers, weight decals or cab cards were lost, stolen or defaced, complete Sections A, B and C. The cab card must be attached to this application when requesting a replacement plate. **NOTE:** When the application is being submitted through an agent/messenger, a copy of applicant's photo identification must be attached.

Replacement Fees:	Plate	\$7.50
	Renewal Sticker	\$7.50
	Weight Class Decal	Free
	Replacement Cab Card	\$4.50
	Additional Cab Cards (at time of renewal)	\$1.50

4. Prepare check or money order payable to PA Department of Transportation. **DO NOT SEND CASH.**
5. Send this application with payment to the address listed on reverse side.

NOTE: When the application is being submitted through an agent/messenger, a copy of applicant's photo identification must be attached. If the vehicle is owned by a company or a corporation, a letter is required on company letterhead identifying the person who is authorized to sign Section D to receive the replacement registration plate on behalf of the business. If the replacement plate is mailed to a company/corporation, the only requirement is a letter on business letterhead authorizing the representative for the company/corporation to sign in Section D. This letter must be attached to the application before submitting to the Department.