



Utah State Tax Commission

# Application for Special Plates and Decals

TC-142

Rev. 1/13

Return application and fees to : Motor Vehicle Enforcement Division  
210 North 1950 West  
Salt Lake City, UT 84134  
Telephone: 801-297-2600

Make check or money order payable to Utah State Tax Commission  
Please use a separate form for each license type.

Company name: \_\_\_\_\_ License number: \_\_\_\_\_

Manufacturer       Transporter       Dealer       Dismantler

As owner, partner or corporate officer of the above company, I am applying to the Utah State Tax Commission for the following items:

_____ Dealer plates* (\$12.00 each – includes decal).....	\$ _____
_____ Motorcycle plates* (\$12.00 each – includes decal).....	\$ _____
_____ Dismantler, manufacturer or transporter plates* (\$10.00 each) .....	\$ _____
_____ Renewal decals for dealer plates (\$10.50 each) .....	\$ _____
_____ Renewal decals for dismantler, manufacturer or transporter plates (\$8.50 each) .....	\$ _____
*Handling fee required with each plates order (\$2.50 for 1-2 plates, \$3.50 for 3 or more plates) .....	\$ _____
<b>Total</b>	<b>\$ _____</b>

Additional instructions: \_\_\_\_\_

Decal number (office use only): \_\_\_\_\_

Renewal decals are for plate numbers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I, the undersigned, being duly sworn, depose, and say that I have applied for a license to engage in the business shown above; and I hereby make application for special license plates. The license plates will not be used on any vehicle other than the vehicles authorized under the provisions of the law.

**I further certify, under penalty of law, that all vehicles operated, displaying such special plates, will be insured as prescribed by law.**

Insurance company \_\_\_\_\_ Policy number \_\_\_\_\_

Address \_\_\_\_\_ Telephone number \_\_\_\_\_

**Note:** You must submit a current copy of your plate insurance declaration every time you order or renew plates. Insurance must be issued in the the name of the licensed business.

\_\_\_\_\_  
Firm name

\_\_\_\_\_  
Signature (must be signed by owner, partner or corporate officer or signer designated by POA on file with MVED)

\_\_\_\_\_  
Printed name of signer

\_\_\_\_\_  
Date