

APPLICATION FOR NEW OR DUPLICATE LICENSE PLATES

STEP #1	APPLICANT AND VEHICLE INFORMATION				
	Owner(s) Name			Daytime Phone Number () -	
	Mailing Address		City	State	ZIP
	Vehicle Make	Model	Year	VIN	
	Body Style	Original License Plate Number		Expiration Date	
	Number of Plate(s) lost, stolen, destroyed		Plate Surrendered		
<p>If license plate(s) cannot be surrendered because they are lost or stolen, duplicate license plates (plates that are reproduced with the same plate number) cannot be displayed on the vehicle until the validation stickers on the original plates have expired.</p>					
<p>This form cannot be used to replace lost, damaged, or mutilated embossed plates. You must reapply for embossed plates using the form MV-145.</p>					
STEP #2	<p>In case of lost, damaged or mutilated plates, a new or duplicate license plate and registration certificate will be issued by the County Treasurer. Damaged or mutilated license plates must be surrendered to the County Treasurer when you receive your new license plates.</p>				
	<p>The fee to obtain a replacement license plate is eight dollars (\$8.00), made payable to the County Treasurer. A replacement plate is the next available consecutive plate.</p>				
	<p>The fee to obtain a duplicate license plate is thirty dollars (\$30.00), made payable to the County Treasurer. A duplicate plate is the plate with the same number or combination that you currently have; WYDOT will reproduce your plate.</p>				
	<p>Please note that there are restrictions as to what type of plates may be duplicated.</p>				
Signature of Approval by County Treasurer or Deputy			Date		
AFFIDAVIT					
<p>I hereby apply for new or duplicate license plate(s) if applicable. I will surrender my original certificate of registration and plate(s) upon issuance of new or duplicate plate(s). I understand there will be a fee of eight dollars (\$8.00) for new license plates or thirty dollars (\$30.00) for duplicate license plates to be remitted and made payable to the County Treasurer. I swear or affirm under penalty of perjury that all information on this application is true and correct.</p>					
Signature of Applicant			Date		
STEP #3	<p><u>APPLICANT SHALL MAIL THIS APPLICATION AND FEE TO THE COUNTY TREASURER IN YOUR COUNTY OF REGISTRATION</u></p>				
	<p>FOR ADDITIONAL INFORMATION: call 307-777-3908, fax 307-638-5073, or visit our website at http://www.dot.state.wy.us</p>				