



Application for Duplicate Registration Card, Replacement of Registration Plate, Renewal Sticker or Weight Class Sticker

For Department Use Only

CHECK (✓) PROPER BLOCK

- Application for Duplicate Registration Card(s). Complete Sections A, B and either D or E. (Fee \$4.50/\$1.50 depending on request. See NOTE in Section B.)
- Replacement of registration plate, renewal sticker or weight class sticker - Complete Sections A, B and either D or E. **NOTE: Section E is required for all replacement registration plate requests. Section E is not required to be completed when applying for a replacement renewal sticker or weight class sticker. Instead, the vehicle owner must complete Section D.** (Fee \$7.50; no fee required for replacement of weight class sticker). Do not use this application for replacement of dealer plates.
- Replace an Illegible Registration Plate - Complete Sections A, C and D. (No Fee for Standard Issued Registration Plate.)

A APPLICANT AND VEHICLE INFORMATION AS LISTED ON CURRENT REGISTRATION CARD				
Title Number	VIN	Registration Plate Number	Expiration Date MO: YR:	
Last Name (or Full Business Name)	First Name	Middle Name	PA DL/Photo ID # or Bus. ID#	Date of Birth
Co-Owner Last Name	First Name	Middle Name	PA DL/Photo ID #	Date of Birth
Owner's Change of Address (Complete only if different from registration card)	New Street Address			
	City	State	Zip Code	

B APPLICATION FOR DUPLICATE REGISTRATION CARD(S) OR REPLACEMENT OF (Check (✓) appropriate blocks)	
<input type="checkbox"/> Registration Card	<input type="checkbox"/> Registration Plate
<input type="checkbox"/> Renewal Sticker	<input type="checkbox"/> Weight Class Sticker - Sticker # _____
REASON: <input type="checkbox"/> *Lost <input type="checkbox"/> *Stolen <input type="checkbox"/> Defaced <input type="checkbox"/> Never Received <input type="checkbox"/> Other _____	
<i>* If the registration plate is lost or stolen, it must be reported to the State Police or your local law enforcement office.</i>	
NOTE: In conjunction with replacement of your plate, you will receive one registration card. If additional registration cards are desired, the fee is \$1.50 for each card. Number of Duplicate Registration Cards requested @ \$1.50 each _____	
In conjunction with replacement of the renewal sticker or weight class sticker, you will receive one registration card. If additional registration cards are desired, the fee is \$4.50 for each card. Number of Duplicate Registration Cards requested @ \$4.50 each _____	

C AUTHORIZATION TO REPLACE AN ILLEGIBLE REGISTRATION PLATE (Verification from Law Enforcement Officer Required)	
On this date, registration plate number _____ on a _____ has been determined to be illegible. (Year) (Make)	
By signing this form, the owner or registrant is requesting and will receive a standard issue replacement registration plate, free of charge.	
_____ Signature of Police Officer	_____ Badge Number
_____ Department Name	_____ Telephone No.
_____ Date	

D APPLICANT(S) SIGNATURE	
I/We hereby certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500.00 and/or imprisonment up to 1 year (18 PA. C.S. Section 4904[b]).	
X _____ Signature of Applicant or Authorized Signer	() _____ Telephone Number
X _____ Signature of Co-Applicant/Title of Authorized Signer	_____ Date

E APPLICATION FOR FREE ISSUANCE - Complete only if applicant is entitled to free issuance because original was lost in the mail and application is being made within 90 days of original issuance or a replacement. APPLICATION FOR A REPLACEMENT REGISTRATION PLATE - Complete only if replacement registration plate is being issued.	
SUBSCRIBED AND SWORN TO BEFORE ME: MONTH DAY YEAR	I/We hereby state that application was made for the above registration plate or that the items as indicated were never received due to loss in the mail.
SIGNATURE OF PERSON ADMINISTERING OATH	X _____ Signature of Applicant or Authorized Signer
SIGNATURE OF CO-APPLICANT/TITLE OF AUTHORIZED SIGNER	X _____ Signature of Co-Applicant/Title of Authorized Signer
S T A M P	SIGN IN PRESENCE OF NOTARY