APPLICATION FOR A RONALD MCDONALD HOUSE LICENSE PLATE

Remit a \$30.00/\$60.00 check or money order made out to North Carolina DMV with this application.

Mail your application to the following address:

NCDMV

Special/Personalized Plates 3155 Mail Service Center Raleigh, NC 27699-3155

| □ Regular Ronald McDonald House <u>\$30.00</u> □ | | Personalized Ronald McDonald House <u>\$60.00</u> | | | | |
|--|-------------------------------------|---|-------------------------------|------------|--------------------|--|
| NOTE : You are allow | ed four (4) spaces for a persona | lized message. | | | | |
| When applying for a Personalized Ron leaves only four (4) spaces for a Personal numbers only. Choice cannot conflict v | onalized message. The four spaces n | nay be a combinat | ion of letters | and number | rs, but cannot be | |
| The \$30.00/\$00.00 Spe | NAME(To agree with certificate | | o the regul | ar neense | . 1 00. | |
| Home | NAME (10 agree with certificate of | or title) | | | | |
| | FIRST | MIDDLE | | LAS | Γ | |
| AREA CODE-TELEPHONE NUMBER | | | | | | |
| Office | | ADDRESS | ADDRESS | | | |
| | | | | | | |
| AREA CODE-TELEPHONE NUMBER | CITY | STATE | | ZIP CODE | | |
| | Current North Carolina | | | | | |
| | Plate Number | Vehic | Vehicle Identification Number | | | |
| | Driver License # | Year | Model | Make | Body Style | |
| | Owner's Certification of Liab | ility Insurance | | | | |
| I CERTIFY FOR THE MOTOR VE | CHICLE DESCRIBED ABOVE THAT I HAVE | E FINANCIAL RESPO | NSIBILITY AS R | EQUIRED BY | LAW. | |
| PRINT OR TYPE FUL | L NAME OF INSURANCE COMPANY AUT | HORIZED IN N.C. – N | OT AGENCY OF | R GROUP | | |
| POLICY N | UMBER – IF POLICY NOT ISSUED, NAME | OF AGENCY BINDIN | G COVERAGE | | | |
| SIGNATURE OF OWNER | | DATE OF CERTIFICATION | | | | |