



# APPLICATION FOR DEALER PLATE ISSUANCE PROGRAM

(Print or Type all information)

DMV OFFICE USE ONLY	
REG. CLASS	LIMIT
PAS	_____
MCY	_____
COM	_____
TRL	_____
ATV	_____
IN-TRANSIT PERMITS	_____

### SEE PAGE 3 FOR INSTRUCTIONS ON HOW TO FILL OUT THIS APPLICATION

This program is restricted to dealers who meet the eligibility requirements set forth in Commissioner's Regulations Part 78 section 78.23(a), and the Dealer Plate Issuance Manual (MV-461) section 1.2.

#### SECTION 1

1. Facility Identification Number		2. Dealer E-mail Address		
3. Contact Person				
4. Telephone Numbers (Required) - <b>failure to provide an emergency phone number will result in your application being rejected</b>				
Business	Emergency	Fax		
5. Business Name As It Appears on Your Official Business Certificate				
6. Business Address - Street		City	State	Zip Code County
7. What type of security will you use in storing plates and in-transit permits? (Security for plates and in-transit permits is subject to DMV inspection and approval.)				
<input type="checkbox"/> Locked Safe <input type="checkbox"/> Locked Room <input type="checkbox"/> Other _____				
8. How many vehicles and trailers did you sell at retail last year?				
(a) Passenger Original _____	(b) Commercial Original _____	(c) Motorcycle Original _____	(d) Trailer Original _____	(e) ATV Original _____
9. Registration plates/in-transit permits are requested for the following registration classes:				
<input type="checkbox"/> Passenger <input type="checkbox"/> Commercial <input type="checkbox"/> Motorcycle <input type="checkbox"/> Trailer <input type="checkbox"/> ATV <input type="checkbox"/> In-Transit Permit				
<i>Plates and permits issued under this program can be issued only for vehicles and trailers that are sold at retail.</i>				

#### SECTION 2

1. List all names and facility numbers of any businesses licensed by DMV, of which you are or have been an owner, principle, officer, member or partner.

Name	Facility Number

2. How many years has the owner or one principle in the company been in business? \_\_\_\_\_

**SECTION 3****CERTIFICATION:**

I certify that I have read, and will abide by, the statutes of the Vehicle and Traffic Law, the Commissioner's Regulations and procedures outlined in the Dealer Plate Issuance Manual (MV-461), and, if applicable, the All-Terrain Vehicle Dealer Registration Instructions (RV-2), governing the Dealer Plate Issuance Program. I understand that any violation of the statute, Commissioner's Regulations or procedures may result in the withdrawal of my authorization to participate in the Dealer Plate Issuance Program, and/or suspension or revocation of my dealer registration or the imposition of a civil penalty.

I further certify that all the information I have provided on this form is true and accurate to the best of my belief.

\_\_\_\_\_  
(Print or Type Name of Officer of Corporation or Owner)

\_\_\_\_\_  
(Print or Type Title)

**X**

\_\_\_\_\_  
(Signature of Officer of Corporation or Owner)

\_\_\_\_\_  
(Date of Application)

**FALSE STATEMENTS MADE ON THIS APPLICATION ARE SUBJECT TO SECTION 210.45 OF THE PENAL LAW.**

*RETURN THIS APPLICATION TO:* New York State Department of Motor Vehicles  
Dealer Plate Issuance Unit  
6 Empire State Plaza, Room 322  
Albany, NY 12228

reset / clear

# HOW TO FILL OUT THE APPLICATION

## 1. Facility Identification Number

Provide the facility identification number printed above your name and address on your official business certificate, Form MV-61P.

## 2. Dealer E-mail Address

Provide the e-mail address for your dealership that can receive communications from DMV via the Internet.

## 3. Contact Person

Provide the name of a person who can be contacted during and outside of your business hours.

## 4. Telephone/Fax Numbers

- Provide a telephone number where you can be reached during business hours. (Required)
- Provide an emergency telephone number where you can be contacted outside your business hours. (Required)
- Provide a fax number, if available.

## 5. Business Name

Provide the business name as it appears on your official business certificate.

## 6. Business Address

Provide your business address as it appears on your official business certificate.

## 7. Secure Storage for Plates and In-Transit Permits

Specify the type of security you will use to store plates and in-transit permits. If you check "Other", you must identify the type of facility or device. For example, if you will not store plates in a locked safe or a locked room, but will store them in a locked cabinet, check "Other", and write "locked cabinet" next to "Other".

## 8. Plate Limit

For the last calendar year, list the total original retail sales for the classes of vehicles and trailers shown.

## 9. Registration Class

Identify the registration class(es) for which you are requesting registration plates and/or in-transit permits.

## Signature Line

- Print or type the name of the corporate officer or the owner.
- Provide the signature of the corporate officer or the owner.
- Print or type the title of the corporate officer or the owner.
- Fill-in the date the application is signed.

