

Section 1: Applicant Information

Non-Profit 501(c)(3) Organization Specialty License Plate Sponsorship Application

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	•••						
Name of C	Organization						
Physical A	ddress (required)		City	State	Zip		
Mailing Address (if different from above)		City	State	Zip			
Tax ID Nur	nber	Website Address		Phone Numbe	<u>l</u> er		
Check O	ne			<u>.I</u>			
	New Specialty Plate Application		☐ Plate Design Revision Reques				
	Name Change Request		☐ Update Contact Information				
Please re	ead the instructions and include all required do	ocumentation. Incomplete applica	tions will be returned for additional ir	nformation.			
Section 2	2: Required Documents						
If this is	a new Specialty Plate Application, you must i	nclude the following documents:					
	Copy of the applicant's Internal Revenue Ser	vice (IRS determination letter sho	wing their tax-exempt status per fede	eral code 26 US	C § 501(c)(3).		
	• The date of this letter must be at least	one year prior to the application o	date.				
	Copy of signed charter or bylaws including b	oard of directors.					
	Proof that the organization is in good standi	ng with the Montana Secretary of	State.				
	When a Parent Company exists:						
	 Proof that the applicant is in good stan 						
	Proof that the organization's headquarters of	•					
	 An item showing a Montana address as 			, etc.			
_	Proof the organization has an active tel		opy of a telephone bill.				
	Proof the organization banks with a Montan						
_	Bank routing and account information	·	lates at (406) 444-2086.				
	W-9 form, which can be obtained at www.ir.						
	The required donation as determined by the	•					
	Once license plate design is approved and released, donations will be received electronically using the information provided on the required Electron Funds Transfer (EFT) form, available here: https://doimt.gov/wp-content/uploads/204-Electronic-Funds-Transfer-Sign-Up-2019.pdf						
	, , , , , , , , , , , , , , , , , , ,						
	 The DOJ, in consultation with MCE, will approve or reject the initial plate design (proof) based on the specifications outlined. The DOJ will return rejected designs to the sponsor's liaison outlining the reasons for disapproval. 						
	Once the initial or reworked plate des			onsor must app	rove the design by		
	signing the back of the proof.		, , ,		σ ,		
	 Applications may take up to six weeks 	s to process.					
If this is	a Name Change Request, you must include th	e following documents:					
	New Application (MV115)						
	Copy of the applicant's Internal Revenue Service (IRS) determination letter showing their tax-exempt status per federal code 26 USC § 501(c)(3).						
	• The date of this letter must be at least						
	Proof that the organization is in good standi	· ·	State.				
If this is	a Plate Design Revision Request, you must in						
	Appropriate application to sponsor a special	• •		•			
_	• MV115 for 501(c)(3) or MV116 for go	•					
	The required donation as determined by the				and the state of t		
		is approved and released, donations will be received electronically using the information provided on the required Electronic					
	Funds Transfer (EFT) form, available here: https://dojmt.gov/wp-content/uploads/204-Electronic-Funds-Transfer-Sign-Up-2019.pdf An electronic copy (i.e., flash drive) of the plate design in a layered format (software must be Adobe Illustrator, Photoshop, or CorelDraw).						
	A check in the amount of \$4,120 made paya	ble to Montana Correctional Ent	erprises (includes 3% administration f	ee per § 61-3-1	11, MCA).		
	The DOJ, in consultation with MCE, wi						
	rejected designs to the sponsor's liaison						
	 Once the initial or reworked plate des 	ign is approved by DOJ, MCE, and	the Montana Highway Patrol; the spo	nsor must appr	ove the design by		

If this is an Update Contact Information Request, you can complete and submit this form to the State of Montana MVD

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431

Applications may take up to six weeks to process.

signing the back of the proof.



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Section 5. Liaison information			
Name of organization's specialty license plate liaison:	E-mail address:	Telephone r	number:
Mailing Address	City	State	Zip
Section 4: Plate Purpose			·
To help educate potential donors, provide a brief summary Limit your description to 50 words or less. This information	_		
Example: This plate benefits organizations that create or support of the public awareness and education programs, scholarship progra	• • • • • • • • • • • • • • • • • • • •	·	
Section 5: Indemnification			
By signing this application, the Sponsor agrees to incagents, and employees from and against all loss, dare the name, identifying phrase, and graphic on the ger damages, injury, liability, suits, or proceedings from	nages, injury, liability, suits, a neric specialty license plate, i	and proceedings arising ncluding but not limite	g from the use of ed to any loss,
Section 6: Certification			
☐ I understand accept § 61-3-472 through § 61-3-48☐ Under penalty of law (§ 61-3-481, MCA), I certify t and correct to the best of my knowledge, informa business entity or trust, I have full authority to do Dated this Day of, 20	hat the statements made, and i tion, and belief; I am the persor so.	nformation contained on	
Printed name			
Legal signature			
Section 7: Department Use Only			
☐ The application for sponsorship is approved☐ The application for sponsorship is rejected for the	following reasons:		
Specialty Plate Coordinator Signature:	Date:		