

**APPLICATION FOR A  
POW/MIA  
SPECIALTY MOTORCYCLE LICENSE PLATE**

**Remit a \$20.00/\$50.00 check or money order with this application.**

Regular POW/MIA **\$20.00**

Personalized POW/MIA **\$50.00**

**NOTE:** You are allowed four (4) spaces for a personalized message.                          **P**  
**O**

When applying for a Personalized Order of the POW/MIA motorcycle license plate, the suffix PO will be the last letters on the plate. This leaves only four (4) spaces for a Personalized message. The four spaces may be a combination of letters and numbers but cannot be numbers only. Choice cannot conflict with another class of license plates.

**The \$20.00/\$50.00 special fee is an (ANNUAL) fee due in addition to the regular license fee.**

<p><b>Home</b></p> <p>_____</p> <p>AREA CODE-TELEPHONE NUMBER</p> <p><b>Office</b></p> <p>_____</p> <p>AREA CODE-TELEPHONE NUMBER</p>	<p>NAME (To agree with certificate of title)</p> <p>_____</p> <p align="center">FIRST                                      MIDDLE                                      LAST</p>		
	<p>_____</p> <p align="center">ADDRESS</p>		
	<p>_____</p> <p align="center">CITY                                      STATE                                      ZIP CODE</p>		
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%; padding: 5px;"> <p><b>Current North Carolina</b></p> <p>_____</p> <p align="center">Plate Number</p> <p>_____</p> <p align="center">Driver License #</p> </td> <td style="width:50%; padding: 5px;"> <p>_____</p> <p align="center">Vehicle Identification Number</p> <p>_____</p> <p align="center">Year              Model              Make              Body Style</p> </td> </tr> </table>	<p><b>Current North Carolina</b></p> <p>_____</p> <p align="center">Plate Number</p> <p>_____</p> <p align="center">Driver License #</p>	<p>_____</p> <p align="center">Vehicle Identification Number</p> <p>_____</p> <p align="center">Year              Model              Make              Body Style</p>
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**Owner's Certification of Liability Insurance**

I CERTIFY FOR THE MOTOR VEHICLE DESCRIBED ABOVE THAT I HAVE FINANCIAL RESPONSIBILITY AS REQUIRED BY LAW.

\_\_\_\_\_

PRINT OR TYPE FULL NAME OF INSURANCE COMPANY AUTHORIZED IN N.C. – NOT AGENCY OR GROUP

\_\_\_\_\_

POLICY NUMBER – IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE

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<p>_____</p> <p align="center">SIGNATURE OF OWNER</p>	<p>_____</p> <p align="center">DATE OF CERTIFICATION</p>
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