FOR MVC USE ONLY Approved REASON FOR REJECT:	PLATE ISSUED				CLERK ID: DATE:
New Jersey Motor Vehicle Commission					Special Plate Unit P.O. Box 015 Trenton, New Jersey 08666-0015 609-292-6500 ext. 5061 EMAIL: NJMVCSPU@mvc.nj.gov

This application must be completed by an applicant requesting organization license plates or a set of license plates that require approval from a designated authority. Please see the attached information sheet for required coordinators or authorized officials designated to sign for verification purposes.

Section 1

Enter type of plate you are applying for:		Current Plate Number:		
Registration Expires Month Year	Full Vehicle Identification Number of Vehicle			
Name of Registered Owner (please print or type)	Driver License Nu	mber / Corp Code		
Street Address	City	State	Zip Code	
Home Phone Number:	Alternate Number:			

Your phone number will only be used in the event there is a discrepancy with your application.

Vehicle Make	Year	Body Type	Weight Class	Color(s)	Model

This application should only be completed by all applicants applying for special organization plates (a nonprofit community, alumni or service organization in New Jersey) or press plates::

		YES	NO
1.	Have you ever been convicted of: a. N.J.S.A. 39:4-50, driving under the influence of alcohol or drugs or while ability impaired by alcohol, N.J.S.A. 39:4-50.2, refusing to take a Breathalyzer test, or a violation of a substantially similar law in another jurisdiction?		
	b. N.J.S.A. 39:4-96, reckless driving or a substantially similar law in another jurisdiction?		
2.	Have you ever been convicted of N.J.S.A. 2C:11-5, reckless vehicular homicide/ death by auto or vessel, or N.J.S.A. 2C:11-5.3, strict liability vehicular homicide?		
3.	Have your driving privileges in New Jersey or any other state been revoked or suspended for any reason within the past two years?		

Section 1 Continued

No particular identifying plate (including press plates) or special organization plate may be issued to an applicant who has been convicted within the last 10 years of an offense listed in number 1. No particular identifying plate or special organization plate may be issued to an applicant who has ever been convicted of an offense listed in number 2. An applicant whose driving privileges have been suspended within the past two years, for any other reason (number 3), may apply for a particular identifying plate or special organization plate two years after restoration of driving privileges.

I certify the statements on this application are true and I understand I must surrender the special organization license plates to the Motor Vehicle Commission within 15 days after my association with the organization is terminated, and that I must surrender press plates to the Motor Vehicle Commission immediately upon termination of press affiliation.

Signature of Applicant	Date	
Signature of Coordinator or Required Authority	Date	
Printed Name of Coordinator or Required Authority		

Title of Coordinator or Required Authority

Members of organizations requiring additional information as indicated on the information sheet, continue to page 3.

National Guard Plate (Section 2)

(Must be active or honorably discharged)

Name of Member:							
Unit	Air		Ar	my			
Street Address							
City	:	State		Zip Code			

Signature of Unit Commander	Printed Name of Unit Commander	Date
Signature of Unit Commander	Printed Name of Unit Commander	Date

Military Reserve Plates (Section 3)

(Must be active)

Name of Member:							
Unit		Branch of Service					
Street Address							
City	State		Zip Code				

Signature of Unit Commander

Printed Name of Unit Commander

Date

Military Medal Recipient license plates (Section 4)

Enter Plate Choice		
Name of Member		
Branch of Service		
Street Address		
City	State	Zip Code

Signature of Applicant

First Aid or Rescue Squad/Fire Department (Section 5)

I, the undersigned, certify that the applicant named herein is a member in good standing of the following fire department or rescue squad.

Name of Member						
Name of Fire Department or Rescue Squad						
Street Address						
City	State	Zip Code				

Signature of Fire Chief, Director or Commissioner

Printed Name of Fire Chief, Director or Commissioner

Date

Street Rod (Section 6)

I, the undersigned, certify that the named vehicle is registered with a New Jersey street rod club which is affiliated with the National Street Rod Association, Inc.

Name of Member:		
Name of Club		
Street Address		
City	State	Zip Code

Signature of N.S.R.A. Club President or Inspector

Printed Name of N.S.R.A. Club President or Inspector

Date

Section 7

I certify that the below named person is employed in the position and title listed below and uses his/her vehicle to cover news, take photographs, or film events in connection with his/her employment.	Affidavit of Newsperson (Notarization Required)				
Legal Name	I, the undersigned, certify I am currently employe	d as a newsperson or photographer			
Pen Name	and use my vehicle to cover news, take photograp	ohs or film events in connection with			
Title & Duties	my employment.				
Name of Organization	- Signature Da	ate			
Address	Sworn and subscribed before me this	day of			
	20				
Sworn and subscribed before me thisday of	Signature of Notary				
20					
Signature of Notary					

Information Sheet for License Plates Requiring Approved Authorization

SECTION 1

The following information is for organization license plates. The organization coordinator or liaison must approve the applicant.

To organization member: Fill in your name and address on the application and complete all applicable sections. **Print clearly or type**. Aside from necessary signatures, this form can be completed electronically and printed. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

To organization liaison:

- Assign license plate number in the top box (plate issued) on the application.
- Certify the applicant is a member.
- Return the completed application to the address shown on the top right corner of this instruction sheet. Include a photocopy of the member's current registration certificate, describing the vehicle on which these plates are to be placed.

The following are service organization license plates. The fee is \$15.00.

Airborne	American Legion	AMVETS	Army Retired
Coast Guard Auxiliary	Civil Air Patrol	Marine Corps League	Merchant Marine
Merchant Marines Academy	Pearl Harbor Survivors	Purple Hearts	Submarine Veterans
Tin Can Sailors	Veterans of Foreign Wars	Vietnam Veteran	Retired Air Force
Disabled American Veterans	West Point	Lakehurst Navy	Navy League
Gold Star (no fee)			

The following are community organization license plates. The fee is \$25.00.

Children First Foundation (Choose Life)	Fireman's Mutual Benevolent Association	Fraternal Order of Police	International Firefighters	Kiwanis International
Knights of Columbus	Masons	Operating Engineers	Police Benevolent Association	Professional Engineers
Rotary International	Square Dancers	Telephone Pioneers	International Brotherhood of Teamsters	National Police Defense Fund
Newark Firefighters	Police Department Honor Legion	United Bowhunters of New Jersey		

The following are alumni organization license plates. The fee is \$50.00.

New Jersey Institute of Technology	Notre Dame	Penn State
Rutgers University	Seton Hall	Stevens Technology
Temple University	University of Michigan	University of Delaware

SECTION 2

The following information is for the following military license plates listed below:

*Disabled Veterans	**National Guard- Air Guard	**National Guard – Army	*Prisoner of War
\$15.00	\$15.00	Guard \$15.00	(No fee)

The liaison must approve applicant.

The requirements are as follows:

To Applicant: Fill in your name and address on the application and complete all sections. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

To liaison:

- Assign license plate number in the top box (plate issued) on the application. (for NG Plates only)
- Copy of applicant's DD214 or DD215 & Award of Disability percentage letter from the Veterans Administration (for DV plates only)
- Certify the applicant is a member.
- Return the completed application to the address shown on the top right corner. Include a photocopy of the member's current registration certificate, describing the vehicle on which these plates are to be placed.

*The Special Plate Unit will assign the license plate number. Signature must be obtained through authorized official designated to sign for verification purposes.

**Vehicle must be owned by applicant (may not be leased).

SECTION 3

This information is for the following reserve plates. The unit commander must approve applicants.

Navy Reserve	Marine Reserve	Air Force Reserve	Army Reserve	Coast Guard Reserve
\$25.00	\$25.00	\$25.00	\$25.00	\$25.00

The requirements are as follows:

To applicant: Fill in your name and address on the application. Complete all sections of the application. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned by the applicant.

To unit commander:

- Certify the applicant is a member.
- Return the completed application to the address shown on the top right corner. Include a photocopy of the member's current registration certificate, describing the vehicle on which these plates are to be placed.

SECTION 4

This information is for the following military license plates.

Silver Star	Combat Infantry Badge	Congressional Medal of Honor (CMH)	Navy Cross
(No fee)	\$15.00	(No fee)	\$15.00

To military member: Fill in your name and address on the application and complete all sections applicable. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

- Return the completed application to the address shown on the top right corner. Include a photocopy of the member's current registration certificate, describing the vehicle on which these plates are to be placed.
- Must submit a copy of your DD-214 (certificate of release or discharge from active duty).
- The plate number will consist of 3 alpha characters chosen by applicant followed by the alphas CMH. For example ABC*CMH. The asterisk symbolizes the Congressional Medal of Honor emblem.
- Vehicle must be registered by Congressional Medal of Honor recipient.

SECTION 5

This information is for the following first responder license plates.

Emergency Medical Technician	First Aider	Firefighter
Ambulance (EMT-A) \$25.00	\$15.00	\$15.00

To applicant: Fill in your name and address on the application. Complete all sections of the application. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

- Return the completed application to the address shown on the top right corner. Include a photocopy of the member's current registration certificate, describing the vehicle on which these plates are to be placed.
 - a. EMT-A must submit an Emergency Medical Certificate (EMS) Certificate issued by the New Jersey Department of Health.
 - b. First Aider the squad chief of your department must sign the application.
 - c. Fire Fighter the department chief must sign the application.

SECTION 6

This information is for the following special license plates.

Amateur Radio	Street Rod
\$15.00	\$15.00

To applicant: Fill in your name and address on the application. Complete all sections of the application. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

- Return the completed application to the address shown on the top right corner with: A photocopy of the applicant's current registration certificate, describing the vehicle on which these plates are to be placed.
 - a. Amateur Radio must provide a photocopy of the current amateur radio license issued by the Federal Communications Commission (FCC).

b. Street Rod – must be a member of the National Street Rod Association (NSRA); submit a copy of NSRA Membership Card and Inspection Form 100. The President of your club or the inspector who signs the Inspection Form 100 must sign the application in Section 6.

SECTION 7

This information is for the following press license plates.

New Jersey Press		
\$50.00		

The requirements are as follows:

To Applicant: Fill in your name and address on the application and complete all sections applicable. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

- A copy of your New Jersey Press Shield or a copy of your credentials issued by the New Jersey Press Association (NJPA) or New Jersey Society of Professional Journalists (NJSPJ).
- Completed Affidavits shown in Section 7 of the Application for License Plates Requiring Approved Authorization (SP-23). The employer and applicant sections must be completed and notarized.
- A clear photocopy of the current, valid registration.

New York Press	
\$50.00	

The requirements are as follows:

To Applicant: Fill in your name and address on the application and complete all sections applicable. **Print clearly or type**. Enter the vehicle description exactly as it appears on the registration certificate. Vehicle **must** be owned or leased by the applicant.

- A copy of your New York Press Identification Card.
- Completed Affidavits shown in Section 7 of the Application for License Plates Requiring Approved Authorization (SP-23). The employer and applicant sections must be completed and notarized.
- A clear photocopy of the current, valid registration.

For any additional information related to any of these license plates, please contact the Special Plate Unit at (609) 292-6500 ext. 5061 or visit our website at <u>www.njmvc.gov</u>.