STATE OF CALIFORNIA
DMV
DEPARTMENT OF MOTOR VEHICLES

A Public Service Agency

APPLICATION FOR PLATES, STICKERS, DOCUMENTS

VEHICLE ID NUMBER/HULL ID NUMBER	VEHICLE LICENSE NUMBER/VESSEL CF NUMBER	MAKE
BIRTHDATE, IF DP PLACARD	DISABLED PERSON PLACARD NUMBER	DRIVER LICENSE/ID CARD NUMBER

☐ Complete appropriate box in **Sections A, B** and **D** if item was lost, stolen, destroyed/mutilated, surrendered, not received, or if it will be reassigned.

☐ Complete **Sections C** and **D** for California Clean Air Vehicle Decals.

Section A

PLATES, STICKERS DOCUMENTS REQUEST

I request:

☐ **Replacement** ☐ **Duplicate**

☐ License Plate ☐ Disabled Person Placard

☐ License Sticker ☐ Vessel Sticker

☐ Registration Card ☐ Vessel Certificate of Number

☐ Disabled Person ID Card

Section B

PLATES STICKERS DOCUMENTS INFORMATION

Item has been: ***(Check appropriate box)***

☐ Lost ☐ Stolen ☐ Destroyed/Mutilated ☐ Surrendered to DMV

☐ Not Received I have furnished the department with my correct address and will destroy the original item(s) if received.

☐ Reassigned to: Make _____ Vehicle Identification Number _____

Section C

CLEAN AIR VEHICLE DECALS

The above described vehicle meets Federal Inherently Low Emission Vehicle (ILEV) standards and qualifies for California Clean Air Vehicle Decals which permit access to High Occupancy Vehicle (HOV) lanes.

I request:

☐ **Original** ☐ **Replacement**

My vehicle is one of the following:

☐ ZEV (Zero Emission Vehicle)

☐ ULEV (Ultra Low Emission Vehicle)

☐ SULEV (Super Ultra Low Emission Vehicle)

Section D

CERTIFICATION

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct .

DATE	SIGNATURE OF REGISTERED OWNER	PRINTED NAME
ADDRESS		
CITY	STATE CA ZIP	DAYTIME TELEPHONE NUMBER ( )