

DEPARTMENT OF MOTOR VEHICLES  
 Agency of Transportation  
[dmv.vermont.gov](http://dmv.vermont.gov)

 120 State Street  
 Montpelier, Vermont 05603-0001  
 802.828.2000

My current plate number is		and expires (MM/YYYY)	
Senate Seat Assignment		House Seat Assignment	
Make	Model	Year	



Owner/Lessee	Name (Owner/Lessee)			License #		
	Mailing Address			Physical Address		
	City	State	ZIP	City	State	ZIP
	Email			Phone		

I hereby affirm, under penalty of perjury of the laws of the State of Vermont, that the information on this form is true and correct. This declaration made under penalties of 23 V.S.A. § 202 & § 4110.

<b>Signature Of Owner/Authorized Agent:</b>	<b>Date:</b>
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**FOR DEPARTMENT USE ONLY - DO NOT WRITE IN THE SPACE BELOW:**

- |                                    |                                     |
|------------------------------------|-------------------------------------|
| <input type="checkbox"/> 232       | <input type="checkbox"/> 465        |
| <input type="checkbox"/> 233       | <input type="checkbox"/> 490 P      |
| <input type="checkbox"/> One Plate | <input type="checkbox"/> Two Plates |

Old Plate#:	Vehicle Type:	Expires:	Replacement Plate (07)
New Plate#:	Reg. Type:	Plate Type:	Rater #:
			Misc
			Total