



Application/Certification for Organizational License Plates

Instructions: Please complete the entire application (owner and/or co-owner). Submit appropriate fees with application.

Name of Organization:

University of Maryland School of Pharmacy

I certify that the individual below is a bona fide member of the above organization:

Signature of Authorized Representative

Owner's Name, First	Middle	Last	Driver's License Number
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Street Address	City	County	State	Zip Code
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Co-Owner's Name, First	Middle	Last	Driver's License Number
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I hereby authorize the representative of my organization to review/release my personal information for official purposes:

Owner's Signature

Co-Owner's Signature

Vehicle Information

Year	Make	Sticker No.	Title No.	Tag No.
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Vehicle Identification Number

Insurance Co.

Policy/Binder No.

Organizational Member: (Check one) Owner Co-Owner

Check Class: Passenger Car Multi-purpose vehicle Truck 1 ton or less Motorcycle

Fees: Non Logo Organizational Tags: \$15.00 Logo: \$25.00

I certify, under penalty of perjury, that the above information is true and correct to the best of my knowledge:

Signature of Owner

Date

Signature of Co-Owner

Date

MVA Use Only: New Issue Substitute Surviving Spouse S/N

Gratis Paid **Approved by:** _____ **Tag Issued:** _____

You may either **mail** your application and the appropriate fees to:
Motor Vehicle Administration, Vehicle Registration Organizational Unit; 6601 Ritchie Highway, Glen Burnie, MD 21062;
or **visit** the MVA full Service Office in Glen Burnie and have your plates issued to you.

Original - MVA

Copy - Customer