

Local Program or Torch Run Coordinator: _____



APPLICATION FOR AN NCDMV SPECIAL OLYMPICS NORTH CAROLINA LICENSE PLATE

Remit a \$25.00 check or money order payable to Special Olympics North Carolina with this application.

Mail to: License Plate Program, Special Olympics North Carolina,
2200 Gateway Centre Boulevard, Suite 201, Morrisville, NC 27560-9122.

Once SONC receives 300 orders, which are required by NCDMV to issue the plates,
NCDMV will notify you of next steps to receive your plate.

An additional \$25 will be charged annually when you renew your plates.
\$15 of that additional fee will go to Special Olympics North Carolina.
Thank you for your contribution!

The \$25.00 special fee is an (ANNUAL) fee due in addition to the regular license fee.

Home _____ AREA CODE-TELEPHONE NUMBER	NAME(To agree with certificate of title)		
	_____	_____	_____
	FIRST	MIDDLE	LAST

Office _____ AREA CODE-TELEPHONE NUMBER	ADDRESS		
	_____	_____	_____
	CITY	STATE	ZIP CODE
Current North Carolina		_____	
_____		Vehicle Identification Number	
Plate Number		_____	
_____		Year	Model
Driver License #		Make	Body Style

<p align="center">Owner's Certification of Liability Insurance</p> <p>I CERTIFY FOR THE MOTOR VEHICLE DESCRIBED ABOVE THAT I HAVE FINANCIAL RESPONSIBILITY AS REQUIRED BY LAW.</p>			

<p align="center">PRINT OR TYPE FULL NAME OF INSURANCE COMPANY AUTHORIZED IN N.C. – NOT AGENCY OR GROUP</p>			

<p align="center">POLICY NUMBER – IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE</p>			

SIGNATURE OF OWNER		DATE OF CERTIFICATION	