



APPLICATION FOR REPLACEMENT PLATES, STICKERS, DOCUMENTS

Complete all sections of this form and submit to any DMV office or mail to: DMV, P.O. Box 942869, Sacramento, CA 94269-0001

NOTE: There is a fee to replace most items.

For current fee information, see www.dmv.ca.gov, or call 1-800-777-0133.

DMV USE ONLY	
DL/ID/OL NUMBER	<input type="checkbox"/> CA <input type="checkbox"/> O/S _____
DL/ID NUMBER (IF PRIOR RDF)	<input type="checkbox"/> CA <input type="checkbox"/> O/S _____
NUMBER OF PLATES SURRENDERED	TECHS INITIALS
OFFICE	DATE
ID #	

VEHICLE LICENSE PLATE/CF NUMBER	MAKE	VEHICLE ID NUMBER/HULL ID NUMBER
DISABLED PERSON (DP) PLACARD NUMBER	BIRTH DATE, IF DP PLACARD	ENGINE NUMBER (MOTORCYCLES ONLY)

SECTION A: REGISTERED OWNER OF RECORD (Please Print)

TRUE FULL NAME (LAST, FIRST, MIDDLE OR BUSINESS NAME)	DRIVER LICENSE/ID CARD NUMBER
CO-OWNER TRUE FULL NAME (LAST, FIRST, MIDDLE)	DRIVER LICENSE/ID CARD NUMBER
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST., AVE., RD., CT., ETC.) APT./SPACE/STE. # CITY	STATE ZIP CODE
COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRIMARILY GARAGED	
MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL ABOVE) APT./SPACE/STE. # CITY	STATE ZIP CODE

SECTION B: PLATES, STICKERS, DOCUMENTS REQUEST — I am requesting replacement of (Check appropriate box(es)):

NOTE: For replacement of missing License Plate, License Sticker, or DP Placard, if the original item is later located or received, the original item is no longer valid and must be destroyed or returned to DMV.

- | | | | |
|---|---|---|--|
| <input type="checkbox"/> License Plates | <input type="checkbox"/> Vessel (Boat) Sticker | <input type="checkbox"/> Disabled Person (DP) Placard | <input type="checkbox"/> CVRA Weight Decal |
| <input type="checkbox"/> Registration Card | <input type="checkbox"/> Vessel Certificate of Number | <input type="checkbox"/> Disabled Person (DP) ID Card | <input type="checkbox"/> CVRA Year Sticker |
| <input type="checkbox"/> License Sticker (Month Sticker Also <input type="checkbox"/>) | <input type="checkbox"/> Planned Non-Operation (PNO) Card | <input type="checkbox"/> Trailer or OHV ID Card | |

SECTION C: PLATES, STICKERS, DOCUMENTS INFORMATION — The item requested was (Check appropriate box(es)):

- Lost Stolen Unknown
- Not Received from DMV (Allow 30 days from issue date before reapplying) Not Received from Prior Owner
- Destroyed/Mutilated (Any remnants/remains of the plate(s) must be surrendered to DMV)
- Surrendered to DMV Number of plates surrendered One Two
- Special Plates (Personalized (ELP), Disabled Person (DP), Disabled Veteran (DV)) were Retained by Owner
- New Registration Card with Updated Address
- Per CVC §4467 – Copy of a police report, court documentation, or other law enforcement documentation required.
- Other – Explain:

SECTION D: MISSING LICENSE PLATE APPLICATIONS

If your address is **different** from that which appears in the records of the department, you must appear in person at a Department of Motor Vehicles office and bring an original or facsimile copy of proof of ownership (e. g., Certificate of Title, or Registration Card, or Registration Renewal Notice), and your Driver License or Identification Card. If the license plate(s) were stolen, a copy of a police report identifying the plate(s) as stolen is required. If license plates have been replaced within the last 90 days, a CHP verification is required.

Check appropriate box:

- One license plate missing (automobiles/two-plate commercial vehicles/pick-ups only). The remaining plate must be surrendered to DMV.
- Two license plates are missing or one license plate is missing for a single-plate commercial truck tractor, motorcycle, or trailer. The registered owner must immediately notify a law enforcement agency (e.g., police or sheriff's dept., CHP, etc.).

SECTION E: CERTIFICATION

The registered owner mailing address is valid, existing, and an accurate mailing address. I consent to receive service of process at this mailing address pursuant to CVC §1808.21, Code of Civil Procedure §§415.21(b), 415.30(a), and 416.90.

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

PRINT TRUE FULL NAME	TITLE IF SIGNING FOR COMPANY	DAYTIME TELEPHONE NUMBER ()
SIGNATURE OF REGISTERED OWNER X		DATE