

**MV 904SO (03-01)**

Commonwealth of Pennsylvania  
Department of Transportation  
Bureau of Motor Vehicles  
**P.O. Box 68266**  
Harrisburg, PA 17106-8266

**APPLICATION FOR  
SPECIAL ORGANIZATION  
REGISTRATION PLATE**

**Fee: \$20.00**

▲ **FOR DEPARTMENT USE ONLY** ▲

<b>A VEHICLE DESCRIPTION AND APPLICANT INFORMATION</b> (complete this section exactly as information appears on current registration card)						
TITLE NUMBER		CURRENT REG. PLATE #		CURRENT EXPIRATION	MAKE OF VEHICLE	YEAR
In conjunction with replacement of your plate, you will receive one registration card. If additional registration cards are desired, the fee is \$1.50 for each card.					How many extra registration cards do you want? _____	
LAST NAME		JR., etc.	FIRST NAME	MIDDLE INIT.	TELEPHONE NUMBER ( ) HOME _____ ( ) WORK _____	
STREET ADDRESS - Must list a street address. P.O. Box # alone is not acceptable.				CITY	STATE	ZIP CODE
<b>B TO BE COMPLETED BY ORGANIZATION</b>						
<b>NAME OF ORGANIZATION:</b>						
NAME OF ORGANIZATION CHAPTER, POST, LODGE, EMPLOYER, etc. <b>SHRINERS OF PENNSYLVANIA</b>					TELEPHONE NUMBER <b>(412) 831-7878</b>	
STREET ADDRESS <b>5429 Florida Avenue</b>			CITY <b>Bethel Park</b>		STATE <b>PA.</b>	ZIP CODE <b>15102</b>
<b>C TO BE COMPLETED BY ORGANIZATION OFFICIAL</b> (see special instructions below)						
I certify that the individual named in Section A is a member in good standing of the organization listed in Section B:						
NAME OF ORGANIZATION OFFICIAL <b>Bob Stanley</b>			TITLE <b>Chairman PA. Shriners License Plate Program</b>		SIGNATURE <b>X</b>	
<b>D I CERTIFY THAT ALL INFORMATION GIVEN ON THIS APPLICATION IS TRUE AND CORRECT AND THAT WHEN I CEASE TO BE A MEMBER OF THE ABOVE NAMED ORGANIZATION, I WILL IMMEDIATELY RETURN THE REGISTRATION PLATE TO THE DEPARTMENT OF TRANSPORTATION.</b>						
X _____ APPLICANT'S SIGNATURE IN INK				_____ DATE		

**GENERAL INFORMATION REGARDING A SPECIAL ORGANIZATION REGISTRATION PLATE**

- Fee required with this application is \$20.00. Payment is to be made by check or money order payable to "Commonwealth of Pennsylvania". DO NOT SEND CASH.
- No special organization registration plate will be duplicated. If your plate is lost, stolen or defaced, we will reissue you the next available plate in our series for \$7.50. To apply for replacement, complete Form MV-44 and submit the required fee.
- Requests for special organization registration plates are restricted to passenger vehicles, trucks and motorhomes with a registered gross weight of not more than 9,000 lbs. **Motorcycles and trailers do not qualify for special organization registration plates.**
- NO REFUND OF FEE will be issued when applicant cancels request after order is placed.
- This application, completed in full, along with a check or money order should be mailed to: Bureau of Motor Vehicles, Special Organization Plate Program, P.O. Box 68266, Harrisburg, PA 17106-8266.
- When the applicant ceases to be a member in the organization or ceases to be a notary public as listed in Section B, the registration plate must be returned to the Department. Complete Form MV-44 and submit a fee of \$7.50 for reissue of a regular series registration plate.
- All telephone numbers will be held in confidence and used only in the event of a problem with your application.
- Special organization plates are in number sequence only and may not be personalized.
- To avoid possible problems with citations with your old registration plate, return it to: Department of Transportation, Bureau of Motor Vehicles, Return Tag Unit, P.O. Box 68597, Harrisburg, PA 17106-8597 after you have received your special organization plate.

**SPECIAL INSTRUCTIONS - SECTION C**

- If applicant is a notary applying for a notary public plate, the applicant's notary seal should appear in this section instead of an official's signature.
- If applying for a Fraternal Order of Police plate, the Lodge seal must be affixed to this application.