

## APPLICATION FOR EXEMPT PLATES

<b>STEP #1</b>	<b>APPLICANT INFORMATION</b>					
	Exempt Entity Name					
	Mailing Address			City	State	ZIP
Contact Person			Email	Daytime Phone Number		
<b>STEP #2</b>	<b>VEHICLE #1-ALL FIELDS ARE MANDATORY</b>					
	Is this request for a new exempt plate or for an exempt plate transfer from another vehicle? <input type="checkbox"/> Transfer Plate# _____ <input type="checkbox"/> New or If this is replacing a lost/stolen/damaged plate list plate# _____					
	Is the request for this vehicle for Handicapped Exempt Plates? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Vehicle Make		Year	VIN		
	Model	Color	Body Style	Title #	Fuel Type	
	<b>VEHICLE #2-ALL FIELDS ARE MANDATORY</b>					
	Is this request for a new exempt plate or for an exempt plate transfer from another vehicle? <input type="checkbox"/> Transfer Plate# _____ <input type="checkbox"/> New or If this is replacing a lost/stolen/damaged plate list plate# _____					
	Is the request for this vehicle for Handicapped Exempt Plates? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Vehicle Make		Year	VIN		
	Model	Color	Body Style	Title #	Fuel Type	
	<b>VEHICLE #3-ALL FIELDS ARE MANDATORY</b>					
	Is this request for a new exempt plate or for an exempt plate transfer from another vehicle? <input type="checkbox"/> Transfer Plate# _____ <input type="checkbox"/> New or If this is replacing a lost/stolen/damaged plate list plate# _____					
	Is the request for this vehicle for Handicapped Exempt Plates? <input type="checkbox"/> Yes <input type="checkbox"/> No					
	Vehicle Make		Year	VIN		
	Model	Color	Body Style	Title #	Fuel Type	
	<b>VEHICLE #4-ALL FIELDS ARE MANDATORY</b>					
Is this request for a new exempt plate or for an exempt plate transfer from another vehicle? <input type="checkbox"/> Transfer Plate# _____ <input type="checkbox"/> New or If this is replacing a lost/stolen/damaged plate list plate# _____						
Is the request for this vehicle for Handicapped Exempt Plates? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Vehicle Make	Year		VIN			
Model	Color	Body Style	Title #	Fuel Type		

<b>STEP #3</b>	<p><b>Exempt Plate Transfers:</b> If requesting an exempt plate transfer, the plate number must belong to the exempt entity. It cannot be a plate number that the applicant received with the vehicle if purchased from another entity.</p>	
	<p><b>Handicapped Exempt Plates:</b> Handicapped Exempt plates are provided to senior centers that currently qualify for both exempt plates and handicapped plates. An application must be completed with The Wyoming Department of Transportation's Driver Services program to obtain handicapped placards or plates.</p>	
	<p><b>Please Include:</b></p> <ul style="list-style-type: none"> <li>• A copy of the title or lease agreement for each vehicle that needs an exempt plate, a handicapped exempt plate, or an exempt plate transfer <b>MUST</b> be included with this application.</li> <li>• A \$5.00 fee for <b>EACH</b> vehicle that needs a new plate must be included with this application</li> <li>• A \$2.00 fee for <b>EACH</b> vehicle that needs a plate transfer must be included with this application</li> <li>• If more than four vehicles are on the request please use additional applications</li> </ul>	
<b>STEP #4</b>	<p><b>AFFIDAVIT</b></p> <p>I hereby swear or affirm under penalty of perjury that all information on this application is true and correct and that I am lawfully applying for an Exempt Plate.</p>	
	Signature of Applicant	Date
<b>STEP #5</b>	<p><b><u>APPLICANT SHALL MAIL THIS APPLICATION, REQUIRED DOCUMENTATION, AND FEES TO:</u></b> WYDOT, ATTN, Motor Vehicle Services, 5300 Bishop Blvd., Cheyenne, Wyoming 82009-3340</p>	
	<p><b>FOR ADDITIONAL INFORMATION PLEASE CALL:</b> Motor Vehicle Services at 307-777-4709 <b>or email</b> <a href="mailto:mvsplates@wyo.gov">mvsplates@wyo.gov</a></p>	
<b>FOR WYOMING DEPARTMENT OF TRANSPORTATION USE ONLY</b>		
Agency Code	Issued By	Date