

1100 New Bern Avenue
Raleigh, North Carolina 27697-0001

APPLICATION FOR A COLLEGIATE INSIGNIA LICENSE PLATE

COLLEGE NAME _____

___ Regular Collegiate Fee **\$25.00**

___ Personalized Collegiate Fee **\$45.00**

NOTE: When applying for a Personalized Collegiate license plate, there are only four (4) spaces available for a personalized message. The four spaces may be a combination of letters or numbers but cannot conflict with another classification of license plates.

THE ABOVE FEES ARE ANNUAL FEES DUE IN ADDITION TO THE REGULAR ANNUAL LICENSE FEES.

___ Automobile ___ Private Small Truck	Name (To agree with certificate of title)	COLLEGIATE \$ _____ PERSONAUZED \$ _____ TOTAL \$ _____
Home	FIRST _____ MIDDLE _____ LAST _____	CLASSIFICATION COLLEGIATE
AREA CODE - TELEPHONE NUMBER _____	ADDRESS _____	BRANCH NO. _____ AGENT _____
Office	CITY _____ STATE _____ ZIP CODE _____	
AREA CODE - TELEPHONE NUMBER _____	Current North Carolina	DMV VALIDATION
	PLATE NUMBER _____ VEHICLE IDENTIFICATION NUMBER _____	
	STICKER NUMBER _____ YEAR _____ MODEL _____ MAKE _____ BODY STYLE _____	

IF PERSONALIZED COLLEGIATE DESIRED, LIST CHOICES IN ORDER OF PREFERENCE:

- | | | | | |
|-------|-------|-------|-------|-------|
| 1. | 2. | 3. | 4. | 5. |
| _____ | _____ | _____ | _____ | _____ |

OWNER'S CERTIFICATION OF LIABILITY INSURANCE

I CERTIFY FOR THE MOTOR VEHICLE DESCRIBED ABOVE THAT I HAVE FINANCIAL RESPONSIBILITY AS REQUIRED BY LAW.

PRINT OR TYPE FULL NAME OF INSURANCE COMPANY AUTHORIZED IN N.C. - NOT AGENCY OR GROUP

POLICY NUMBER - IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE

SIGNATURE OF OWNER

DATE OF CERTIFICATION