

Application/Certification for Organizational License Plates

		lete the entire application see reverse, lower right co		o-owner). Su	bmit appropriate	fees with	
Name of Organ			7 W.S.W	Baltimore			
I certify that the	individual I	pelow is a bona fide memb	per of the above	organization:			
ி Signature of A		The state of the s			THE PROTECTION OF THE PARTY OF		
Owner's Name, First		Middle	La	Last		Driver's License Number	
Street Address		City		County	Sta	ate Zip Code	
Co-Owner's Name, First		Middle	La	Last Driver		er's License Number	
I hereby authoriz	ze the repres	entative of my organization to	o review/release	my personal inf	ormation for officia	al purposes:	
⊕Owner's Signature			Co-Owner's Signture				
Vehicle Informa	ation						
Year Make		Sticker No.	Title No.		Tag No.		
Vehicle Identific	ation Numb	er					
Insurance Co.			Policy/Binder No.				
Organizational Check Class: E Fees: Non Logo] Passenge	r Car 🗖 Multi-purpose	-	ton or less	☐ Motorcycle		
I certify, under po	enalty of perj	ury, that the above information	on is true and cor	rect to the bes	t of my knowledge	•	
⊕Signature of Owner:					Dat	е	
Signature of Co-Owner: Date							
MVA Use Only:	☐ New Iss	ue 🗖 Substitute 🗖 Su	rviving Spouse	☐ S/N			
☐ Gratis ☐ Paid Approved by:				Tag Issued:			
You may either mail your application and the appropriate fees to: Motor Vehicle Administration, Vehicle Registration Organizational Unit; 6601 Ritchie Highway, Glen Burnie, MD 21062; or visit the MVA Full Service Office in Glen Burnie and have your plates issued to you.							
Original - MVA Copy - Customer							