

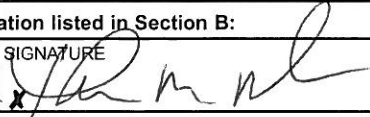
**MV-904SO (2-08)**

Commonwealth of Pennsylvania  
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> <i>(complete this section exactly as information appears on current registration card)</i>				
TITLE NUMBER	CURRENT REG. PLATE #	CURRENT EXPIRATION	MAKE OF VEHICLE	YEAR
LAST NAME (OR FULL BUSINESS NAME)		FIRST NAME	MIDDLE NAME	PA DL/PHOTO ID# OR BUS. ID #
STREET ADDRESS - Must list a street address. P.O. Box # alone is not acceptable.		CITY	STATE	ZIP CODE
				TELEPHONE NUMBER ( ) HOME _____ ( ) WORK _____
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? _____
<b>B TO BE COMPLETED BY ORGANIZATION</b>				
<b>NAME OF ORGANIZATION: SAINT JOSEPH'S UNIVERSITY</b>				
NAME OF ORGANIZATION, CHAPTER, POST, LODGE, EMPLOYER, etc. <i>Alumni Relations Office</i>			TELEPHONE NUMBER <i>(610) 660-3201</i>	
STREET ADDRESS <i>5600 City Avenue.</i>		CITY <i>Philadelphia</i>	STATE <i>PA</i>	ZIP CODE <i>19131</i>
<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 <i>Thomas Monaghan</i>		TITLE <i>Executive Director</i>	SIGNATURE 	
<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 SPECIALTY PLATE**

- The applicant listed in Section A must be a registered owner of the vehicle as indicated on the vehicles registration credential. If the vehicle is a leased vehicle, Form MV-1L, "Application for Lessee Information", must be completed and attached. (Note: Form MV-1L is available on our website at [www.dmv.state.pa.us](http://www.dmv.state.pa.us).)
- 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 specialty plate will be duplicated. If your plate is lost, stolen or defaced you will need to reapply for a specialty plate by completing this application and submitting with the appropriate fees. Should you need an immediate replacement plate, please complete and submit Form MV-44, "Application for Duplicate Registration Card, Replacement of Registration Plate, Renewal Sticker or Weight Class Sticker" and submitting a fee of \$7.50. A standard issued plate will be issued until the replacement specialty plate can be provided. (Note: Form MV-44 is available on our website at [www.dmv.state.pa.us](http://www.dmv.state.pa.us).)
- Requests for specialty registration plates are restricted to passenger vehicles and trucks with a registered gross weight of not more than 10,000 lbs. **Motorcycles and trailers do not qualify for specialty 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.
- Specialty plates are issued in number sequence only and may not be personalized.
- All telephone numbers will be held in confidence and used only in the event of a problem with our application.
- 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 must be affixed 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.