

**The Autism Society of America
Greater Philadelphia Chapter**
PA Specialty License Plate



About the Specialty License Plate Program

The specialty license plate program, benefiting The Autism Society of America Greater Philadelphia Chapter, was created as a means for the organization to further spread awareness. These specialized plates can be obtained by completing the following form. The plates cost \$35 with fifteen of those dollars being a donation to the organization.

Instructions

To obtain The Autism Society of America State of Pennsylvania specialty plate, complete Sections A and D of form MV-904SO (09-04). Send the signed completed form and a check made payable to the Greater Phila. ASA for \$35.00 to the following address;

**Autism Society of America Greater Philadelphia Chapter
c/o 1224 Grant Avenue
Philadelphia, PA 19115
Attn: Specialty Plate**

Your new plates should arrive within 8-10 weeks.

We thank you for your donation and willingness to spread awareness as you drive.

MV-904SO (09-04)Commonwealth of Pennsylvania
Bureau of Motor Vehicles
Special Tag Unit**P.O. Box 68293**

Harrisburg, PA 17106-8293

**APPLICATION FOR
SPECIALTY
REGISTRATION PLATE****Fee: \$20.00**

(PLUS ANY ADDITIONAL FEES CHARGED BY THE ORGANIZATION)

▲ FOR DEPARTMENT USE ONLY ▲

A VEHICLE DESCRIPTION AND APPLICANT INFORMATION <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			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
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 TO BE COMPLETED BY ORGANIZATION									
NAME OF ORGANIZATION:									
NAME OF ORGANIZATION, CHAPTER, POST, LODGE, EMPLOYER, etc.							TELEPHONE NUMBER		
Autism Society of America Greater Philadelphia Chapter							610-358-5256		
STREET ADDRESS				CITY		STATE	ZIP CODE		
1224 Grant Avenue				Philadelphia		PA	19115		
C TO BE COMPLETED BY ORGANIZATION OFFICIAL (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				TITLE		SIGNATURE			
George McClay				Member		X			
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.									
X _____					_____				
APPLICANT'S SIGNATURE IN INK					DATE				

GENERAL INFORMATION REGARDING A SPECIALTY PLATE

- This application, with Sections A and D completed in full, must be returned to the organization official for submission to the Department. No applications sent directly to the Department by the organization member will be processed. All applications must be sent to the Department by the organization.
- 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.
- Fee required with this application is \$20.00. The participating organizations may charge additional fees to offset the cost of plate production and a contribution to the organization. Please contact the organization representative for correct payment method. **DO NOT SEND CASH.**
- No specialty 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 a replacement, complete Form MV-44 and submit the required fee.
- Requests for specialty 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 specialty registration plates.**
- NO REFUND OF FEE will be issued when applicant cancels request after order is placed.
- 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.
- 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.
- Please allow 4-6 weeks for delivery.

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 PA State Lodge seal and the PA State Lodge Recording Secretary signature must be affixed to this application.