Transfer License Plate Request Form

I am requesting that my license plate: ____________________________ be transferred
to the following vehicle: Year: ___________ Make: _________________

Vin#: __________________________________________________________________

PLEASE NOTE: Providing incorrect plate or vehicle information may result in a suspension
associated with your driver license or vehicle registration along with additional fees for
corrective actions.

Signature: __________________________________________________________________

Printed Name: __________________________________________________________________

Date: __________________________________________________________________

Replacement License Plate Number: __________________________________________________________________
(To be completed by LCTC Employee)

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