

ORGANIZATIONAL VEHICLE TAG MEMBER AUTHORIZATION LETTER

Member Information:

Applicant's Name: Last		First				Middle	
Applicant o Hamo.	Last					muuto	
Applicant's Addre	SS: St	eet State		Zip Code			
			·				
Vehicle Identification	on: Tag Number	:	VIN:				
Vehicle Make:	vehicle Model:				Year:		
Applicant's Certification:							
Name of Organization:							
I,							
Applicant's Signatu		Date:			:		
Co-Owner's Signat		Date:			·		
(Co-o	wner must sign a	pplication before it	on before it will be processed for an organization tag)				
Organization Authorization:							
I,, do by affixing my signature hereby certify that the above named individual is a member of our organization and that he/she is authorized to apply for an organizational tag in the organization's name. I understand it is unlawful to willfully make a false statement in so doing, is subject to criminal charges. I certify under penalty of perjury that all answers and information contained within this application are true and correct.							
Official Signature:			Date:		:		
Print Name:							
Official Telephone Number:							
DMV-Vehicle Services – OVT- P- 002- Rev.11/24/2009							