

North Carolina Division of Motor Vehicles
3155 Mail Service Center
Raleigh, NC 27697-3155

APPLICATION FOR A NATIONAL MULTIPLE SCLEROSIS SOCIETY LICENSE PLATE

Remit a \$25.00/\$55.00 check or money order with this application.

- First in Flight Background
 First in Freedom Background
 Regular National Multiple Sclerosis **\$25.00**
 Personalized National Multiple Sclerosis **\$55.00**

NOTE: You are allowed four (4) spaces for a personalized message.
M
S _ _ _ _

When applying for a Personalized National Multiple Sclerosis Society license plate, the prefix MS will be the first letters on the plate. This leaves only four (4) spaces for a Personalized message. The four spaces may be a combination of letters and numbers, but cannot be numbers only. Choice cannot conflict with another class of license plates.

The \$25.00/\$55.00 special fee is an (ANNUAL) fee due in addition to the regular license fee.

Home _____ AREA CODE-TELEPHONE NUMBER Office _____ AREA CODE-TELEPHONE NUMBER	NAME (To agree with certificate of title) _____ FIRST MIDDLE LAST		
	_____ ADDRESS		
	_____ CITY	_____ STATE	_____ ZIP CODE
	Current North Carolina _____ Plate Number _____ Driver License #	_____ Vehicle Identification Number _____ Year Model Make Body Style	

Owner's Certification of Liability Insurance	
I CERTIFY FOR THE MOTOR VEHICLE DESCRIBED ABOVE THAT I HAVE FINANCIAL RESPONSIBILITY AS REQUIRED BY LAW.	
_____ PRINT OR TYPE FULL NAME OF INSURANCE COMPANY AUTHORIZED IN N.C. – NOT AGENCY OR GROUP	
_____ POLICY NUMBER – IF POLICY NOT ISSUED, NAME OF AGENCY BINDING COVERAGE	
_____ SIGNATURE OF OWNER	_____ DATE OF CERTIFICATION