North Carolina Division of Motor Vehicles Application for Drive-Away Registration and Plates

***** ATTENTION: Incomplete or unsigned applications will be returned. ****					
You must choose one:	Business	Individual			
Owner 1 ID #					_
	Full Legal Name of Ow	ner 1 (First, Middle, Last, Suffix) or	Company Name		
Owner 2 ID #	Full Legal Name of Ow	vner 2 (First, Middle, Last, Suffix) or	Company Name		-
Residence Address (Individual) Business Address (F			company Name		
City and State		Zip Code	Tax County		
Mail Address (if different from above)					
I have financial responsibility as re	equired by law.				
Insurance company authorized in N.C.		Policy Number # of plates cov		# of plates covered	
Owner's Signati	ire	Date of 0	Certification		
Fee per plate \$19.50*		H			
	Number of Plates:		(Home) Area Code – Telephone Number		
*Note: An additional \$15.00 per plate will be charged for residents of Durham, Orange, and Wake Counties (\$8.00 for Regional Transit Authority (RTA) Tax & \$7.00 for County Vehicle Registration Tax). An additional \$1.00 per plate Piedmont Authority for Regional Transportatio (PART) Tax will be charged for residents of Randolph County.					
		NOS (Offic	(Office) Area Code – Telephone Number		
		alifications			
	FOR CORRECTION O	F NAME AND ADDRE	ESS ONLY		
	riini Name				
	ADDRESS				
City State		Zip Code		County	
		Lp code		county	
CHANGE OF NAME AND ADDRE explanation. If name is to be correct FINANCIAL RESPONSIBILITY: N	cted, a new certification o	f financial responsibili	ity (Form FR-2) mus	t be furnished	•
company, insurance which would o				benefit of the	anve away
Return application and fee to:	North Carolina Division 3148 Mail Service Cen Raleigh, North Carolina	ter			
I certify that this applicatio knowledge and further ack application is a Class I Fel	nowledge that making	g false application	or providing fals		
Date of Certification	Applicant's Signature		Applicant's H	and Printed or Typed	Name