APPLICATION FOR SAMPLE OR NOVELTY PLATES

	APPL	ICANT	INFO	ORM/	ATION																	
STEP #1	Name																Daytime Phone Number					
	Mailing Address*								City							;	State		ZIP			
S	E-Mail Address							How are the plates being used?														
	*If plate is a gift that is being shipped, use address where you want the plates shipped																					
	PLATE TYPE (Check one plate type only)																					
STEP #2	☐ Sample							# of S						tandard Size Sample plates requested								
	O SPUUDUO									A: MAOMING				# of Motorcycle Size Sample plates requested								
	Novelty WYOMING WYOMING																					
	*DEBBIE												DEBORAH									
		Standa	ard Siz	o Diat	e(s) - 9	Chara	ctar N	/avim	um- C	anital	l otto	rc	Numbe	arc an	d Snad	es On	lv - No	symh	ols			
		Novelt			E(3) - 3	Citata	ctel iv	/ΙαλίΙΙΙ	uiii- C	apitai			ty Plate		u spac	es On	1y - 140) Syllik	1015			
	Novelty Plate 3							Novelty Plate 4														
		110101	ly riac									000	l lac									
		Motor Novelt	_		late(s)	- 7 Cha	racte	r Max	imum	- Capit			s, Num ty Plate		and Sp	aces (Only -	No syr	nbols			
		Noven	yriac									OVE	l									
	Novelty Plets 2								Novelty Plate 4													
	Novelty Plate 3									Noverty Plate 4]			
	FFF //	25111/1	- DV 0	DTIO																		
STEP #3	FEE/DELIVERY OPTIONS □ I will pick up my plates at the WYDOT MVS office in Cheyenne (\$5.00 Per Plate)																					
		-	-							-		-		r Plate	•)							
	☐ I would like my plates shipped to the address above (\$7.00 Per Plate) ☐ I am a WYDOT, county treasurer, or county clerk employee, and this is my FIRST plate (No Fee) (Subject to Verification)																					
	Payment Amount Enclosed: \$									N	/lake	all	check	s/mo	ney o	rders	payal	ole to	WYD	ЭТ		
STEP #4	AFFIDAVIT I hereby swear or affirm that I will be solely responsible for the proper use of the Sample or Novelty Plate(s).																					
	I UNDERSTAND THAT SAMPLE AND NOVELTY PLATES CANNOT BE DISPLAYED ON A VEHICLE AT ANY TIME.																					
	Signature of Applicant												Date									
STEP #5				AP	PLICA	NT SH	ALL N	MAIL	THIS	APPLI	CATI	ON	AND F	FEE P	YABI	.E TO	WYD	OT:				
					TTN: N T ONA I												_					
FOR WYOMING DEPARTMENT OF TRANSPORTATION USE ONLY																						
Issued													Date									