

Florida Highway Safety and Motor Vehicles
Direct Mail and Issuance RM #A330
2900 Apalachee Parkway, MS #72
Tallahassee, FL 32399

Request for Authentication of Florida License Plate

APPLICANT

Name: _____

Address: _____
Street Address City State Zip

Driver License No.: _____ Daytime Phone No.: _____

AUTHENTICATED PLATE DESCRIPTION (1974 or older)

Florida Plate Number: _____ Year of Florida Plate: _____

VEHICLE DESCRIPTION (plate and vehicle must be same year)

Vehicle Year: _____ Make: _____ Body: _____

Vehicle Identification No.: _____ FL Title No.: _____

I hereby make an application for the issuance of the enclosed physical Florida license plate to the above-described vehicle. The physical plate is being submitted for inspection and approval.

Under penalty of perjury, I declare I have read the foregoing document and the facts stated in it are true.

Signature of Applicant

Step 1 Complete, sign, and print letter

Step 2 Securely package letter and license plate and mail to:

Florida Highway Safety and Motor Vehicles
Direct Mail and Issuance RM #A330
2900 Apalachee Parkway, MS #72
Tallahassee, FL 32399

Step 3 Tallahassee will contact you for payment.