

SPECIAL INTEREST PLATE APPLICATION M-37 REV. 8-2015	DMV USE ONLY	CLASS CODE	SPECIAL PLATE COMBINATION	ORGANIZATION I.D. NO.	DATE ISSUED
		<input type="checkbox"/> 01 <input type="checkbox"/> 02 <input type="checkbox"/> 03 <input type="checkbox"/> 11 <input type="checkbox"/> 31			

1. Complete this application and return it to your organization liason with your check or money order for the designated amount payable to "DMV". Do not send cash.
2. Organization liason submit the approved application along with applicant check or money order to: Department of Motor Vehicles, Special Interest Plate Unit, 60-State Street, Wethersfield, CT 06161-0507.
3. **LEASED VEHICLES** - Submit with the application the lessees' name and address.

Select one checkbox below

if selected, Page 2 is required

<input checked="" type="checkbox"/> * Transfer my vanity, low number, or current marker plate to the Special Interest background - \$65.00 FEE. PASSENGER, COMMERCIAL, COMBINATION, CAMP TRAILER, CAMPER)	<input type="checkbox"/> * Replace my current marker plate with an "off-the-shelf" plate from the Special Interest Series - \$65.00 FEE. PASSENGER, COMMERCIAL, COMBINATION, CAMP TRAILER, CAMPER)	<input type="checkbox"/> * I do not have a vanity plate but wish to obtain one on the Special Interest background - \$134.00 FEE. (SEE REVERSE FOR VANITY PLATE INFORMATION)
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CURRENT PLATE NO.	PRESENT REGISTRATION TYPE (Pass. etc.)	DATE REGISTRATION EXPIRES	MAKE	MODEL	YEAR	IS VEHICLE LEASED?
BN-1000	Passenger	1/15/2025	Honda	Pilot	2022	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

NAME(S) AS APPEARS ON REGISTRATION (Last, First, Middle Initial)	VEHICLE IDENTIFICATION NUMBER	DAYTIME PHONE NUMBER
Goodwill, Jane M.	4Y1SL658482411439	203-555-1234

ADDRESS AS APPEARS ON REGISTRATION (Number and Street)	(City or Town)	(State)	(Zip Code)	CT DRIVER LICENSE/ID CARD NUMBER
18 main Street	New Haven	CT	06511	1863211234

NAME OF SPECIAL INTEREST ORGANIZATION	ORG. I.D. NUMBER	NAME OF ORGANIZATIONAL LIAISON (Please print)	SIGNATURE OF ORGANIZATIONAL LIAISON
			X

CANCELLATION OF THIS ORDER WILL NOT ENTITLE YOU TO A REFUND

SIGNATURE OF REGISTRANT	* If your current registration is due to expire within the next 45 days, hold your application until you have renewed your registration.	DATE SIGNED
X Jane M. Goodwill		9/23/2024

** Mail form(s) with payment (see checkbox above) to:
The New Haven Pearls of Excellence Foundation, P.O. Box 3665, Woodbridge, CT 06525

Page 2 is only necessary if you select the vanity plate checkbox on Page 1

VANITY PLATE REQUEST(S)

All letters are equally spaced. No dashes or extra spaces between letters are allowed. Only one dot is allowed. The dot cannot be placed at the beginning or end of a plate number.

List plate request in order of preference. First available preference will be ordered. THE ORDER CANNOT BE CHANGED.

1.	4.
2.	5.
3.	6.

Every attempt will be made to accommodate your request, however, the Department of Motor Vehicles reserves the right to deny issuance of certain requests.

VANITY PLATE OPTIONS

Any combination of letters and numbers - seven characters or less.