

MV-351A (03-03)

Commonwealth of Pennsylvania
Department of Transportation
Bureau of Motor Vehicles
P.O. Box 68620
Harrisburg, PA 17106-8620

**APPLICATION FOR REPLACEMENT OF
TEMPORARY REGISTRATION PLATE**

FOR DEPARTMENT USE ONLY

NOTE: THIS APPLICATION CAN ONLY BE USED BY REGISTERED MOTOR VEHICLE DEALERS AND FULL AGENTS.

INSTRUCTIONS:

1. Complete Sections A, B, C or D - Fee \$5.00 per plate.
2. If shipment of plate(s) was never received, and application is made within 90 days from date of issue, no fee is required. Complete Section D instead of Section C. Attach copy of cancelled check.
3. Do not send cash. Make check or money order payable to PA Department of Transportation.
4. Mail to address listed above.

A DEALER OR FULL AGENT INFORMATION

DEALER/AGENT IDENTIFICATION NUMBER _____

NAME OF BUSINESS (exactly as it appears on your registration card or license)

BUSINESS ADDRESS _____
STREET ADDRESS CITY STATE ZIP CODE

BUSINESS PHONE () _____

B REPLACEMENT OF TEMPORARY PLATE

PLATE NUMBERS TO BE REPLACED

LIST WID# FROM RECEIPT FOR MISSING PLATE(S) _____

C APPLICATION FOR LOST OR STOLEN PLATE REPLACEMENT

I certify that the plate(s) listed in Section B was lost, stolen and that all information given is true and correct.

X _____
SIGNATURE OF APPLICANT OR AUTHORIZED PERSON DATE

\$5.00 fee for each plate

D AFFIDAVIT OF NON-RECEIPT

Complete only if applicant is entitled to a free issuance because original was never received due to loss in the mail, or a plate(s) was missing within the shipment.

I hereby affirm that application was made for the above plate(s) in Section B and that the items as indicated were never received due to loss in the mail, or a plate(s) was missing within the shipment.

SIGNATURE OF APPLICANT(OWNER, DEALER OR AUTHORIZED PERSON)

SUBSCRIBED AND SWORN TO BEFORE ME: MONTH DAY YEAR

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SIGNATURE OF PERSON ADMINISTERING OATH

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A
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SIGN IN PRESENCE OF NOTARY