



U.S. Department of State
OFFICE OF FOREIGN MISSIONS
DIPLOMATIC MOTOR VEHICLE OFFICE

APPLICATION FOR REPLACEMENT PLATES

OMB Approval No. 1405-0072
Expires 03-31-2006
*Estimated burden 30 minutes

SEE INSTRUCTIONS ON REVERSE

ATTENTION: Application cannot be processed without completion of gray shaded areas.

COUNTRY	MISSION TYPE <i>(Embassy, Consulate, UN, OAS, Other)</i>
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REASON FOR NEW PLATES <i>(Check one box)</i>		
1 Plate lost/stolen	2 Plates lost/stolen	Vehicle stolen
Change in position: New position: _____		
Other <i>(Specify reason)</i> : _____		

DATE PLATES LOST/STOLEN <i>(mm-dd-yyyy)</i>	OFM REPORT NO.
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OWNER NAME <i>(Surname)</i>	<i>(First)</i>	<i>(MI)</i>
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I.D. NUMBER	DATE OF BIRTH <i>(mm-dd-yyyy)</i>	VISA	PRINCIPAL	DEPENDENT
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ADDRESS <i>(No., Street, Apt., City, State, Zip Code)</i>

CO-OWNER NAME <i>(Surname)</i>	<i>(First)</i>	<i>(MI)</i>
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I.D. NUMBER	DATE OF BIRTH <i>(mm-dd-yyyy)</i>	VISA	PRINCIPAL	DEPENDENT
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VEHICLE IDENTIFICATION NUMBER	MAKE	MODEL
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BODY	YEAR	WEIGHT	ODOMETER	COLOR
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LIEN HOLDER/LEGAL OWNER <i>(Name in Full) If the registered owner is the legal owner, write NONE.</i>

ADDRESS

The undersigned certifies that, in accordance with the provisions of Title 18 U.S. Code, Section 1001, prohibiting the making of false statements in connection with a federal matter, the information stated here is true and correct.

(MISSION SEAL)	AUTHORIZED SIGNATURE(S)	DATE(S) <i>(mm-dd-yyyy)</i>

LICENSE PLATE NO.

FOR OFFICE USE ONLY
Do Not Write
in this space

FEE:
P:
TITLE MOVED TO: NAME

I.D.#

TAG NO.

(INSURANCE OK)

PRODUCTION DATES
R:
(Q):
(N):
(C):

E:
I:
F:

* The response time is an estimated average including the time needed to look for, get, and provide the information required. You do not have to provide the information requested if the OMB approved has expired. We would appreciate any comments on the estimated response burdens, and recommendations for reducing them. Please send your comments to A/RPS/DIR, U.S. Department of State, Washington, DC 20520.

INSTRUCTIONS

1. Immediately report lost/stolen plates or a stolen vehicle to OFM at 673-5312 during business hours or 647-2412 outside business hours.
2. Type all answers, or write them in block letters.
3. Always write names with surname first, then first name, then middle name or initial. Spell your name exactly as it was given to the Office of Protocol. Applications with names different from the accreditation record will be returned for correction.
4. When writing dates month first, then day, then year (mm-dd-yyyy). Always write the month and give the day and year in numbers only. Always give your date of birth (DOB) exactly as it was given to the Office of Protocol. Applications with a date of birth different from the accreditation record will be returned for correction.
5. Give your current residence address. A duty address is unacceptable unless you live at that address.
6. Copy all the motor vehicle information from the Certificate of Origin or Title. Be very careful when copying the vehicle identification number (VIN).
7. The application must show an authorized signature: for personal vehicles, the owner (and co-owner if applicable); for mission vehicles, the appropriate administrative officer.
8. The application must bear the mission seal.

OFFICE OF FOREIGN MISSIONS USE ONLY

NOTATIONS: (Please include the date and your initials.)

OFM USE ONLY

Time/Date Received