



# APPLICATION FOR A DISABLED AMERICAN VETERAN LICENSE PLATE

**Applicant must be at least 50% service connected disabled to qualify.**

The name of the Disabled American Veteran must appear on the face of the title. This license plate will **replace** the license plate currently on your vehicle. The initial issuance will be from this office. Subsequent renewals may be processed at your local tag office or the Oklahoma Tax Commission. Complete this application and mail it to the address on the back of this form.

Fee:	\$5.00
Insurance Fee:	1.50
Total Fee ( <b>if picked up</b> ):	\$6.50
Mail Fee:	3.00
Total Fee ( <b>if mailed</b> ):	\$9.50

\_\_\_\_\_  
Titled in the Name of

**Please allow 4 weeks for processing.**

Your drivers license number must appear on your check.

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

For OTC Use Only
DAV Plate Number
Decal Number

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Drivers License Number

\_\_\_\_\_  
Email Address (Optional)

**You may choose only one type of Disabled American Veteran license plate.**

DAV plate **without** the international accessibility symbol.

DAV plate **with the international accessibility symbol**. You must list the number and expiration of your parking placard issued by the Department of Public Safety in the spaces provided below.

**My physically disabled parking placard number \_\_\_\_\_ expires \_\_\_\_\_, 20\_\_\_\_.**

I certify that Disabled American Veteran license plate will be displayed on a vehicle with a description as follows:

_____	_____	_____	_____	_____
Title Number	Vehicle Identification Number	Year and Model	License Plate Number	Month and Year of Expiration



\_\_\_\_\_  
Signed under penalty of perjury.

**Follow the instructions on the reverse side of this form.**



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### INSTRUCTIONS

The following items must accompany your completed application.

- 1) Your remittance made payable to the Oklahoma Tax Commission.
- 2) A current insurance verification form.
- 3) A copy of the Reduced Licensing Charge Card Form 599 issued by the Oklahoma Department of Veteran Affairs (DO NOT send original, it will not be returned), or a letter issued by the Oklahoma Department of Veteran Affairs for the purpose of registering your vehicle (This is not the letter issued by the Oklahoma Department of Veteran Affairs which indicates the percentage of disability.).
- 4) The Disabled American Veteran's name must appear on the face of the title or you must be the principal driver of the vehicle. If you are not the owner, but are the principal driver of the vehicle the following statement must be completed.

I certify that I \_\_\_\_\_ am the principal driver of this vehicle,  
(Name of DAV)

which is titled in the name of my \_\_\_\_\_  
(Relationship to DAV)

\_\_\_\_\_  
Signature of Applicant

OKLAHOMA TAX COMMISSION  
MOTOR VEHICLE DIVISION  
ACCOUNTING SECTION  
2501 LINCOLN BOULEVARD  
OKLAHOMA CITY, OK 73194-0013

TELEPHONE NUMBER: (405) 521-2913

TOLL-FREE IN-STATE NUMBER: 1-800-522-8165, EXT. 1-2913

WEBSITE: [WWW.TAX.OK.GOV](http://WWW.TAX.OK.GOV)