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Personalized Plate Replacement

C.R.S. 42-3-211

To replace a plate type listed below, complete this form and return to county motor vehicle office.

PLATE CONFIGURATION							
Type of Plate							
<input type="checkbox"/> Regular Personalized <input type="checkbox"/> Colorado Designer Personalized <input type="checkbox"/> Alumni Personalized <input type="checkbox"/> Call Letter <input type="checkbox"/> Street Rod <input type="checkbox"/> Group Special Personalized <input type="checkbox"/> 2/4 Remake							
Type of Vehicle (i.e. Passenger, Lt. Truck)							
1st Plate Holder's Name (as it appears on registration, Last, First, Middle)						Day Time Phone	
2nd Plate Holder's Name (as it appears on registration, Last, First, Middle)							
Legal Colorado Address (P.O. Boxes are not acceptable)						County	
City					State	ZIP Code	
Mailing Address (If different than legal)							
City					State	ZIP Code	
Reason For Replacement							
<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged							
<p>I understand that if the personalized license plate configuration shown above, has been reported lost or stolen that I or anyone operating my vehicle displaying this personalized plate may run the risk of being stopped, questioned, detained or other action taken by law enforcement. By signing below, I acknowledge that I have been informed of the risks associated with replacement of this personalized plate.</p> <p>I certify, under penalty of perjury in the second degree, that the above statements are true and accurate to the best of my knowledge and that I am a registered owner of these plates and request that they be replaced as indicated by this form.</p>							
Signature						Date	