# Order Your Pure Michigan License Plate Today!

CLEAR FORM

To replace a valid license plate with a Pure Michigan plate, or to purchase a collector version, fill out this application. Plates may be purchased by mail, fax or in-person at a Secretary of State office. There is a $5 fee to purchase a Pure Michigan plate. For an additional prorated fee, your plate may be personalized. Check for the availability of a personalized plate using Plate it Your Way. Personalized plates may only be ordered at a Secretary of State office. Your new plate will arrive by mail within 21 - 30 days. Note: Your normal registration fees will apply when purchasing a Pure Michigan plate for a new vehicle or at renewal.

## To Purchase by MAIL:

Complete the order form below. If paying by check or money order, make payable to **State of Michigan**. If paying by Discover, MasterCard or Visa credit card, complete the credit card section below. Mail the completed application along with payment to: **Michigan Department of State, Renewal By Mail Unit, Lansing, MI 48918.**

## To Purchase by FAX:

If purchasing by fax, you must pay by credit card. Fax the completed application to: **517-322-6822, 24 hours a day/7 days a week.**

## Pure Michigan Collector Plates

Collector plates are for **display purposes only — not for vehicle registration**. Each Pure Michigan collector plate includes the word "SAMPLE" over the plate design. Collector plates cannot be personalized. To order by mail or fax, complete this form, making sure to include your address.

## PURE MICHIGAN PLATE ORDER FORM

Name: _____

Daytime Telephone Number: _____

| Current Plate Number(s) | Code | Current Plate Number(s) | Code |
|---|---|---|---|
| _____ | PM | _____ | PM |
| _____ | PM | _____ | PM |

| | | |
|---|---|---|
| | x $5 | Pure Michigan Plate(s) Quantity |
| | x $10 | PM Collector Plate(s) Quantity |
| $ 0 | | Pure Michigan Plate Total |
| $ 0 | | Pure Michigan Collector Plate Total |
| $ 0 | | Total Amount Due |

**Complete this section if purchasing Collector License Plate(s) ONLY**

Street Address _____ City _____ State _____ ZIP _____

My payment is by (select one):

☐ Discover ☐ MasterCard ☐ Visa ☐ Check (enclosed) ☐ Money Order (enclosed)

**Credit Card Number** ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ ☐☐☐☐ — **Credit Card Expiration Date** ☐☐☐☐

**TOTAL FEES DUE** $ 0

My signature below authorizes the Michigan Department of State to charge my account.

Please **SIGN** your name **x** _____

Please **PRINT** your name **x** _____

Secretary of State
**Ruth Johnson**
www.Michigan.gov/sos