

# NYS HORSE COUNCIL

## CUSTOM PLATE ORDER FORM



A recent survey found over 168,000 equines in New York; there are almost as many ways to enjoy them! The New York State Horse Council is dedicated to being the umbrella organization to represent this diversity of the horse industry. As a non-profit, volunteer group, much is accomplished on a statewide level. You need not be a member of the NYSHC to wear this plate proudly on your car or truck! Twenty-five dollars (\$25) of the initial cost helps the council continue to work for horses in NY. "We speak for the horse" is the motto of the NYSHC, but we can't do it without you!

**Standard Custom Plate Initial Cost.....\$68.00**

Standard plates consisting of three numbers ranging from 100-999 followed by the letters HRS will be assigned by DMV according to the next available number. There is a \$25 annual renewal fee in addition to your regular registration fee, which is billed every two years at the time of your renewal.

**Personalized Custom Plate Initial Cost.....\$93.00**

There is a \$50 annual renewal fee in addition to your regular registration fee, which is billed every two years at the time of your renewal.

**IF YOUR REGISTRATION EXPIRES IN 60 DAYS OR LESS, YOU MUST RENEW IT BEFORE YOU CAN APPLY FOR THESE PLATES.** This plate is also available with the International Symbol of Access (ISA) on it for any registrant with a disability who qualifies for such a plate.

### NYS HORSE COUNCIL APPLICATION FORM

(PLEASE ALLOW 4-8 WEEKS FOR PROCESSING)

**I would like to order:**  Standard Plates for \$68.00     Personalized Plates for \$93.00\*     ISA Requested (Must qualify)  
(Number will be assigned by DMV)

*\*For personalized plates, you may select a combination of at least two (2) but no more than six (6) letters, numbers, and spaces or five (5) if the ISA is requested. Placement of the ISA is always in the last space. The first choice that is available will be ordered. You must include at least one letter. If you are using only one letter in your combination, please do not use I, O or Q.*

1<sup>st</sup> Choice     2<sup>nd</sup> Choice     3<sup>rd</sup> Choice

**For personalized plate combinations only.** You must explain the meaning of your letter/number combination. DMV reserves the right to reject, recall or cancel any plate that is deemed objectionable, including plates that have already been issued.

<b>REQUIRED</b>	1st Choice _____
	2nd Choice _____
	3rd Choice _____

Current N.Y. State vehicle plate number \_\_\_\_\_ Class of Vehicle:  Passenger  Commercial

Name (as it appears on current registration): \_\_\_\_\_ Registration Expiration Date: \_\_\_\_\_

Last: \_\_\_\_\_ First: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Current Address: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Daytime phone number: (\_\_\_\_\_) \_\_\_\_\_

Method of Payment:     Check or money order (made payable to NYSHC)  
 MasterCard     VISA     American Express     Discover

Name as it appears on credit card: \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

### NYS – DMV GENERAL CONSENT FOR RELEASE OF PERSONAL INFORMATION

I \_\_\_\_\_, authorize the New York State Department of Motor Vehicles to disclose or otherwise make available to the NYS Horse Council my name, address, plate number and registration information during the time period in which I hold NYS Horse Council plates issued by DMV.

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_ before me personally appeared \_\_\_\_\_  
(1<sup>st</sup>, 2<sup>nd</sup>) (Month) (Year)

to me known and who by being duly sworn, acknowledged to be person described in and who executed the foregoing consent and he/she duly acknowledged to me that he/she executed the same.

\_\_\_\_\_  
Notary Public

**IMPORTANT:** Making a false statement in any registration application or in any proof or statements in connection with it, or deceiving or substituting in connection with this application, is a misdemeanor under Section 392 of the Vehicle and Traffic Law, and may also result in the revocation or suspension of the registration and/or the applicant's license pursuant to regulations established by the Commissioner.

**MAIL TO: NYSHC • C/O Karen Lassell • P.O. Box 90 • Chazy, NY 12921**

NYS DMV, Custom Plates Unit, Room 231, 6 Empire State Plaza, Albany NY 12228