



**Department of the Secretary of State
Maine Bureau of Motor Vehicles
Request for Duplicate Credentials**

IRP ACCOUNT NUMBER: _____

To: Secretary of State, Bureau of Motor Vehicles, IRP Unit, State House Station 29, Augusta, ME 04333

I _____ of _____

hereby make application for duplicate IRP credentials and enclose the proper fee(s). Indicate vehicle information below.

Make: _____ Year: _____ Plate Number: _____ Unit Number: _____

CAB CARD ONLY: I certify that my original certificate is not in my possession. I hereby agree to return the duplicate certificate promptly to the Secretary of State should my original certificate be found.

The cost of the issuance of a duplicate cab card is **\$5.00.**

Yes, I would like a Temporary – Fax to this number: _____ or email to: _____

I understand there will be a \$3.00 Fax fee added to the invoice.

STICKERS ONLY: *Use if only decals are required.* **\$5.00 Cab Card fee is added to the price of decals.**

YEAR DECAL

TRUCK (2) (\$50)

TRUCK TRACTOR (1) (\$.25)

MONTH DECAL

TRUCK (2) (\$50)

TRUCK TRACTOR (1) (\$.25)

PLATE(S) ONLY: Cost includes cab card and decal fees. See below for cost.

Indicate: NEW DUPLICATE (SAME NUMBER)

↓ PLEASE NOTE CORRECT NUMBER ↓
↓ OF PLATES & FEES ↓

Class AP Plate Number: _____ Single Double

PLATE ORDER FEES

Class AP Plate Number: _____ Single Double **1 of 2 plates for a straight truck = \$11.00**

Class AP Plate Number: _____ Single Double **2 plates for a straight truck = \$16.00**

Class AP Plate Number: _____ Single Double **1 plate for a truck tractor = \$10.50**

Printed Name: _____ Date: _____

Signature: _____

**** If payment is made using a credit card, you must submit a separate credit card authorization form along with this application.**

101 Hospital Street, 29 State House Station, Augusta, ME 04333-0029
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