



**State of Maine**  
**Bureau of Motor Vehicles**  
**Notice of Lost Dealer Plate and Request for Replacement Plate**  
(also applies to loaner, transporter, and trailer transit)

Please print and use blue or black ink only.

Owner's name: \_\_\_\_\_

Legal business name: \_\_\_\_\_

DBA (if applicable): \_\_\_\_\_

Business physical address: \_\_\_\_\_  
Street City/Town/State Zip

Shipping address: \_\_\_\_\_  
Street City/Town/State Zip

Contact name: \_\_\_\_\_ Phone number: \_\_\_\_\_

REPLACEMENT PLATE FEE CHART			
PLATE TYPE	PLATE FEE (per plate)	PLATE TYPE	PLATE FEE (per plate)
New car dealer plate	\$20	Motorcycle dealer plate	\$ 5
New car vanity plate	\$50	Light trailer dealer plate (under 3,000 lbs. unladen weight)	\$ 5
Used car dealer plate	\$20	Heavy trailer dealer plate (over 3,000 lbs.)	\$20
Used car vanity plate	\$50	Transporter plate	\$20
Loaner plate	\$20	Light wrecker dealer plate (26,000)	\$50
Loaner vanity plate	\$50	Heavy wrecker dealer plate (80,000)	\$200
Service plate (new or used car only)	\$50	Trailer transit plate	\$20
Service vanity plate (new or used car only)	\$80	Experimental plate	\$20
Equipment dealer plate	\$20		
Equipment dealer service plate	\$50	Sticker	.50¢ (each)

License type and plate number: \_\_\_\_\_ and Letter of plate: \_\_\_\_\_

Replace plate:  Yes  No

Replace sticker:  Yes  No

I hereby certify that the original plate was:

Lost  Stolen  Mutilated (i.e. bent, faded, etc.-The mutilated plate must be returned to our office.)

If you are replacing plates, please understand, that by applying and receiving replacement plates, you are agreeing to use each plate according to the conditions of the corresponding license issued by the Secretary of State and the authorized use under Maine Motor Vehicle Statutes, Title 29-A.

Application may be faxed to: (207) 624-9126

The undersigned hereby certifies that all the information contained herein is true and correct to the best of my/our knowledge and belief. If representing a company, I further certify that I have been authorized by the company to sign on their behalf.

Signature of authorized person

Printed name

Official title

Date

**BMV USE ONLY**

New plate(s) issued: \_\_\_\_\_

New sticker(s) issued: \_\_\_\_\_

Issued by: \_\_\_\_\_ Date issued: \_\_\_\_\_

MVD-374 Rev 11/2017



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**Payment Information**

Please make check or money order payable to **Secretary of State** and send to: **Bureau of Motor Vehicles, Dealer Licensing, 101 Hospital Street, 29 State House Station, Augusta, ME, 04333.**

Or payment may be made by credit/debit card. Please complete the section below if you choose to pay by credit/debit card.

If you have any questions, please contact Dealer Licensing at (207) 624-9000 ext. 52143.

Credit/Debit Card Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

Name as it appears on the credit/debit card: \_\_\_\_\_

Signature of card holder: \_\_\_\_\_