STATE OF MAINE APPLICATION FOR FIREFIGHTER PLATES

1,		(NAME OF APPLICANT)	
of			
(STF	REET)	(TOWN)	(ZIP CODE)
an active m	ember of the		
application	for a firefighter plate and end	closed is the one-time \$5.00 plate	fee and a copy of my current
registration	n to which the plate will be a	ssigned. I fully understand should	I cease to be a firefighter, the
Fire Chief s	shall immediately notify the S	ecretary of State. I understand the	plate must be returned to the
Secretary of	f State unless I retire from the	e department and the Fire Chief au	thorizes me to continue to use
my firefight	ter plates.		
EIDE CIII	EE2C CEDTIEICATE.	(SIGN	TATURE OF APPLICANT)
FIRE CHI	EF'S CERTIFICATE:		
I hereby cer	rtify that the person above na	amed is an active member of the _	
Fire Depart	ment. I understand that sho	ould this person cease to be a memb	per of this Fire Department, I wil
notify the S	ecretary of State, Bureau of I	Motor Vehicles.	
I have assi	gned plate number	to the above Firef	ighter.
is a one-tim		ed: The fee for a vanity plate is \$25 is application along with a vanity propriate fee.	
	(SIGNATU	RE OF FIRE CHIEF, ACTING FIRE CHIE	F, OR ASSISTANT FIRE CHIEF)
		(TITLE)	
NOTE:	the active firefighter. Th	e firefighter plate will be assigned made special registration plate for firefistered vehicle weight of this vehicle	ighters may be used only on one

Please submit the completed application, along with the \$5.00 fee (unless vanity plate fee desired; see above instructions) and a photocopy of your current registration to:

Specialty Plate Clerk Bureau of Motor Vehicles 29 State House Station Augusta, Maine 04333-0029

PLEASE MAKE CHECK PAYABLE TO: SECRETARY OF STATE