

STATE OF FLORIDA
DEPARTMENT OF HIGHWAY SAFETY AND MOTOR VEHICLES
DIVISION OF MOTOR VEHICLES

Neil Kirkman Building – Tallahassee, Florida 32399

APPLICATION FOR TEMPORARY LICENSE PLATE

TEMPORARY LICENSE PLATE NUMBER _____

THIS IS TO CERTIFY THAT _____

(Street and Number) (Post Office) (City) (State) (Zip)

**HAS MADE APPLICATION FOR AND HAS BEEN ISSUED A TEMPORARY
LICENSE PLATE ON _____ NOT VALID AFTER**

(Month) (Day) (Year)

FOR THE FOLLOWING MOTOR VEHICLE:

(Month) (Day) (Year)

(Make of Vehicle) (Type) (Color) (Identification Number)

BY _____

(Name of Issuing Agency/Dealer & Dealer's License #, If Applicable)

(Address of Issuing Agency/Dealer)

AUTHORIZED ISSUING AGENCY USE ONLY

- Mark Box, If this temporary license plate will be used solely for demonstration purposes**
- Mark Box, If this temporary license plate will be used solely for the delay in the manufacture of a personalized license plate**
- Mark Box, If this temporary license plate will be used solely for other purposes, please explain:** _____

Signature of the Applicant _____

INSTRUCTIONS

The original (accurately completed) copy (White) of this form must be given to the APPLICANT. This form is issued to the applicant as a temporary permit and must be carried in his/her possession at all times while the vehicle is being operated with the temporary license plate (until expiration).

THE TEMPORARY LICENSE PLATE MUST BE DESTROYED WHEN:

1. The regular license plate is received by the applicant.
2. The temporary license plate expires.

The Duplicate Copy (Yellow) of this form must be retained by the authorized issuing agency for at least one (1) year.

WARNING: Any person unlawfully using any such temporary license plate or violating any rule or regulation issued by the Division of Motor Vehicles pursuant to this act shall be guilty of a misdemeanor of the second degree.

Original (White): Applicant

Duplicate (Yellow): Issuing Agency

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