# NYS Fraternal Order of Police Motorcycle License Plate Program 

## Mail to: NYS Fraternal Order of Police, 911 Police Plaza, Hichsville, NY 11801

ELIGIBILITY: You must be an ACTIVE member in NYSFOP. for Two years. residing in New York State, no more than two plates per member. A copy of your Law Enforcement ID and MOTORCYCLE REGISTRATION MUST BE SUBMITTED with the order form. The submission of any false information may result in the prevention and/ or revocation of your privilege to have an FOP plate. Eligibility will be verified. This is the only form that will be accepted when accompanied with the applicant's current registration, personal check or money order and the General Consent for Release of Personal Information signed and notarized.

## Please Print

Current Motorcycle Plate \#
Name (as it appears on current registration)
Expires $\qquad$ Make: $\qquad$ Model $\qquad$ Year $\qquad$
$\qquad$ Middle $\qquad$ Date of Birth_________

Street $\qquad$ County $\qquad$ Tel \# (9am-4pm) (
) $\qquad$
City $\qquad$ State $\qquad$
$\qquad$
Member No. $\qquad$ Lodge No. $\qquad$
Standard NYSFOP Motorcycle Plate as it appears here. Numbers Letters will vary. Cost: $\$ 55.00$ ( $\$ 20.00$ of this initial cost will be retained by the organization to be used for scholarship and administration.) All annual renewals are handled by the New York State Department of Motor Vehicles.


Personalized NYSFOP Motorcycle Plate as it appears above, with any combination of numbers, letters and blanks not to exceed 4 spaces. Some restrictions apply.
Cost: $\$ 73.75$ ( $\$ 40.00$ of this initial cost will be retained by the organization to be used for scholarship and administration.) All annual renewals are handled by the New York State Department of Motor Vehicles. Enter up to three choices in order of preference and allow 4-6 weeks for delivery.


I would like to order Standard Motorcycle Plate \$55.00, Personalized Motorcycle Plate \$73.75
Payment Methods: Check or Money Order should be made payable to NYS Fraternal Order of Police

## New York State Departme nt of Motor Vehicles

GENERAL CONSENT FOR RELEASE OF PERSONAL INFORMATION
I , authorize the New York State Department of Motor Vehicles to disclose or otherwise make available to NYSFOP, my name, address, plate number and registration information during the time period in which I hold NYSFOP Member plates issuedby DMV. Motorist's Signature $\qquad$
STATE OF $\qquad$ COUNTY OF
On this
day of $\qquad$ before me personally appeared
( $\left.1^{\text {st }}, 2^{\text {nd }}\right) \quad$ (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.

