

GOLD STAR LICENSE PLATE APPLICATION

NRS 482.3785

A family member of a **person killed in the line of duty** while on active duty in the Armed Forces of the United States may apply for up to 2 sets of Gold Star license plates.

A family member means a widow, widower, parent, stepparent, grandparent, child, stepchild, dependent, sibling, half sibling, or stepsibling.

A copy of the Report of Casualty, Form DD1300 or equivalent, must be submitted to the Department of Motor Vehicles naming the applicant as a family member.

If the applicant is not listed on form DD1300 as a family member then proof must be submitted to the Department of Motor Vehicles in the form of a birth certificate, adoption papers, etc. If the applicant cannot provide sufficient proof they can request a written decision from the Nevada Office of Veteran Services and present the written decision in lieu of the proof of being a family member.

Gold Star license plates are available for non-commercial vehicles, motorcycles, and trailers.

Gold Star license plates are not available as personalized license plates.

If your vehicle is currently registered, you have the option of maintaining your current vehicle registration expiration date, or renewing for a full 12-month period. Credit for any unused portion of your current registration will be allowed. In applicable counties, if you are renewing for a full 12-month period, and your previous evidence of compliance with emissions standards was obtained more than 90 days ago, the vehicle must be re-inspected prior to registration. Nevada evidence of insurance must be presented at the time of Gold Star license plate purchase.

A license plate production fee of \$3.50 per plate and a prison industry fee of 50 cents per plate are charged in addition to all other applicable fees. These plates are exempt from the fees charged for 8-year reissuance of these plates.

License Plate Size Vehicle (2 Large Plates) Motorcycle / Small Trailer (1 Plate) Large Trailer (1 Plate)**Please print or type**Full Legal Name _____
First Middle LastNevada Driver's License, Identification Card Number,
Date of Birth, or FEIN for businesses _____Physical Address _____
Address City State Zip CodeMailing Address _____
Address City State Zip CodeTelephone No _____ E-Mail
Address _____

I hereby make application for a Gold Star license plate. I have read and understand the conditions under which the license plate is to be issued.

Signature of Applicant _____ Date _____

**FALLEN MILITARY/GOLD STAR LICENSE PLATE FAMILY MEMBER
ACKNOWLEDGMENT AFFIDAVIT
NRS 482.3785, NRS 482.3787**

A family member of a **person who died as a result of injuries sustained** while on active duty in the Armed Forces of the United States may apply for up to 2 sets of Fallen Military license plates.

Or

A family member of a **person killed in the line of duty** while on active duty in the Armed Forces of the United States may apply for up to 2 sets of Gold Star license plates.

A family member means a widow, widower, parent, stepparent, grandparent, child, stepchild, sibling, half sibling, or stepsibling.

A copy of the Form DD1300 "Report of Casualty," death certificate indicating a service related illness or other documentation indicating the veteran died as a result of injuries sustained while on active duty must be submitted to the Department of Motor Vehicles.

If the applicant is not listed on form DD1300 as a family member then complete this affidavit and declare appropriate relation.

If there is a dispute regarding the relationship between the applicant and the member of the Military then the Nevada Office of Veteran Services will determine if the applicant qualifies for the Fallen Military or Gold Star license plate. The applicant would at that time need to submit proof from the Nevada Office of Veteran Services.

Fallen Military/Gold Star license plates are available for noncommercial vehicles, motorcycles and trailers.

Fallen Military/Gold star license plates are not available as personalized license plates.

I declare under penalty of perjury that I am related to _____ and that they are my _____.

Please Print or type

Full Legal Name _____
Last First Middle

Nevada Driver's License, Identification Card Number,
Date of Birth, or FEIN for businesses _____

I affirm the above listed information is true and correct to the best of my knowledge and belief.

Signatures must be original. Photocopies are not acceptable.

Signed this _____ day of _____,

Signature of Applicant

Department of Motor Vehicles Employee **or** Notary Public