



MOTOR CARRIER DIVISION
555 WRIGHT WAY
CARSON CITY, NV 89711-0600
(775) 684-4711
FAX (775) 684-4619
www.dmvnv.com

APPLICATION FOR FARM "IMPLEMENTS OF HUSBANDRY"
PERMANENT LICENSE PLATE

Registration Information: Registration Year: 20
Registrant Name (Legal Business Name) Account Number
Principal's Full Legal Name and Title Principal's Driver License Number
Contact Name and Title Federal Employer Identification Number (FEIN)
Federal DOT Number (if applicable) Telephone Number
Physical Address City State Zip
Mailing Address (If different from the physical) City State Zip

Please check the appropriate type of application:

- Initial Issuance \$104.50 (Farm Plate fee \$100, Plate Production fee \$3.00, Prison Industry fee \$0.50 & Technology fee \$1.00)
Substitute/Replacement \$9.50 (Cab Card \$5.00, Plate Production fee \$3.00, Prison Industry fee \$0.50 & Technology fee \$1.00)
Surrender (Plate needs to be returned to Motor Carrier Division)

General Information

Applicant must be an agricultural user with a minimum gross income of \$5,000 from agricultural pursuits during the immediately preceding calendar year, NRS 361A.030.

The agricultural user is the holder of a policy of liability insurance which provides at least \$300,000 in coverage for bodily injury and property damage resulting from any single accident caused by the agricultural user while operating the implement of husbandry, NRS 482.276.

Applicant must complete this form and submit it to the Department along with a photo of the equipment; copies of any ownership documents (if available); and evidence of a liability insurance policy of \$300,000. Applicants must surrender any plates issued if the vehicle is sold and/or insurance coverage for the vehicle is cancelled.

The Farm plate is a permanent plate. Once issued, they are NON-REFUNDABLE and NON-TRANSFERABLE.

A completed vehicle application Schedule B form (MC003) must accompany this application in order to be processed.

PLEASE NOTE: THIS APPLICATION MUST BE SIGNED OR IT WILL BE RETURNED TO YOU

Printed Full Legal Name (and title if applicable) Signature Date
Date
Phone # E-Mail Address

Table with 6 columns: Date Received, Date Approved, Date Issued, Initials, Account #, Fleet #