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DISABLED VETERAN LICENSE PLATE APPLICATION

NRS 482.377/484B.463

A Veteran of the Armed Forces of the United States, who, as a result of his/her service, has suffered a qualifying, service - connected disability and receives compensation from the United States for the disability; may apply for up to two sets of Disabled Veteran license plates for their personal use.

A certificate or letter from the Department of Veterans Affairs or Department of Defense must be presented with the application indicating a 100% disability rating, a combined service-connected evaluation of 100%, or a service - connected disability of any rating and certificate/letter states that the applicant is considered totally and permanently disabled due to their service-connected disability.

The vehicle bearing Disabled Veteran license plates is exempt from the payment of parking fees, including those collected through parking meters, charged by the State of Nevada, or any political subdivision or other public body within the State.

An owner or operator of a motor vehicle displaying special plates for a disabled veteran issued pursuant to NRS 482.377 may park in a parking space designated for the handicapped (NRS 484B.463) if:

- (a) The parking is done by a disabled veteran with a disability.
(b) The disabled veteran to whom the vehicle is registered is a passenger in the motor vehicle being parked.

PLEASE NOTE: These parking privileges are unique to Nevada and may not be applicable or honored in other states.

Applicable registration fees, Governmental Services Taxes, and Supplemental Governmental Services Taxes (where applicable) are assessed for the issuance or renewal of Disabled Veteran license plates. There is a \$6.50 charge associated to this plate.

If your vehicle is currently registered, you have the option to maintain your current vehicle registration expiration date, or renew for a full 12-month period. Credit for any unused portion of your current registration will be applied.

Please print or type

License Plate Style [] Disabled Veteran [] Disabled Female Veteran

Full Legal Name _____
First Middle Last

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

Nevada Physical Address _____
Address City State Zip Code

Mailing Address _____
Address City State Zip Code

Telephone _____ E-mail _____

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

Signature of Applicant _____ Date _____

Location of the DMV office or County Assessor's office where you will pick up your plates. _____