



Application for Replacement Delaware Dealer Plate

Name of Dealership _____

Dealer Number _____

Dealer Plate Number _____

Lost Damaged Stolen

Police Report Attached Yes No
(Required for Lost or Stolen Plates)

Expiration Date of Plate _____

This is to certify that the above designated dealer plate has been damaged or has been lost or stolen and cannot be located to the best of our knowledge. If the original is recovered, the duplicate plate must be returned to the Division of Motor Vehicles. Any continued use of the duplicate plate may result in the suspension of all dealer privileges.

Proof of insurance must be provided for all dealer plates. A copy of the police report must be attached for lost or stolen plates. Damaged plates do not require a police report if the damaged plate is surrendered to the Division.

I/We hereby certify that that foregoing statement is true and correct and that I/we are to have only one (1) dealer plate with the above designated number in our possession.

Signature – Owner/Officer of Company

Date

Printed Name – Owner/Officer of Company

Clerk's Name _____

Date Received _____

Damaged Plate Returned Yes No