



John J. Barthelmes
Commissioner of Safety

State of New Hampshire

DIVISION OF MOTOR VEHICLES
23 Hazen Drive
Concord NH 03305



Elizabeth A. Bielecki
Director of Motor Vehicles

REQUISITION FOR 20-DAY PLATES

DEALER NUMBER: _____ RETAIL (New & Used) MOTORCYCLE UTILITY

Name of Business: _____

Legal Street Address: _____

City/Town: _____, NH Zip Code: _____

I HEREBY REQUEST _____ 20 DAY PLATES FOR WHICH THE AMOUNT OF \$ _____ IS BEING PAID.
(SOLD IN MULTIPLES OF 10 ONLY).

Authorized Signature

Signed under penalty of unsworn falsification pursuant to RSA 641:3