

Application for Special Farm Plate or Repossession Plate

Business Name		Business Street Address		
City	State MI	Zip Code	FEIN Number	Daytime Phone Number ()
Business Purpose				

I am applying for (check one box):

<input type="checkbox"/> SPECIAL FARM PLATE Fee: \$20 for each plate No. requested: _____ x \$20 = _____	May be issued to a truck, truck tractor, or road tractor used exclusively for: <ul style="list-style-type: none"> ▪ Gratuitously transporting farm crops between the field where produced and the place of storage or used to transport fertilizer, seed, or spray material from the farm location to the field. The truck cannot be used to transport crops for compensation. ▪ Transporting livestock bedding between the field where produced and the place of storage. "Livestock bedding" means straw, sawdust, or sand. ▪ Transporting feed from on-farm storage to an on-farm feeding site. "Feed" means hay or silage. <p>No other driving is allowed. Proof of Michigan no-fault insurance must be submitted.</p>		
Vehicle Information:			
Year	Make	Body Style	Vehicle Identification Number

I certify I am eligible for the Special Farm plate(s) requested and that the assigned plates will only be used as noted above.

Signature X	Date
Printed Name	Driver's License Number

<input type="checkbox"/> REPOSSESSION PLATE Fee: \$20 for each plate No. requested: _____ x \$20 = _____ <div style="text-align: right; font-size: small;">Total Fee</div>	Repossession plates may be issued to an individual, partnership, corporation, or association who in the ordinary course of business has occasion to legally repossess a vehicle in which a security interest is held. These plates are used to move and dispose a repossessed vehicle. Applicants must have a business presence in Michigan with a Michigan address. Proof of Michigan no-fault insurance for all non-owned vehicles must be submitted.
--	---

I certify I am eligible for Repossession plate(s) requested and that the assigned plates will only be used as noted above.

Signature X	Date
Printed Name	Driver's License Number

Application for In-transit Repair Plate

Business Name		Business Street Address		
City	State MI	Zip Code	FEIN Number	Daytime Phone Number ()
Business Purpose				

<input type="checkbox"/> IN-TRANSIT REPAIR PLATE Fee: \$20 for each plate No. requested: _____ x \$20 = _____ <div style="text-align: right; margin-right: 50px;">Total Fee</div>	<p>In-transit Repair plates may be issued to an individual, partnership, corporation, or association who in the ordinary course of business has occasion to legally pick up or deliver a vehicle not required to be titled, or to repair or service a vehicle, or to persons defined as watercraft dealers under MCL 324.80101 for delivering a watercraft or trailer to a customer or to or from a boat show or exposition.</p> <p style="text-align: center;">-or-</p> <p>May be issued to an individual, partnership, corporation, or association who in the ordinary course of business has occasion to legally pick up a vehicle that will be offered for sale at an auction, or to deliver a vehicle that has been offered for sale at an auction.</p> <p>Applicants for In-Transit Repair plates must have a business presence in Michigan with a Michigan address. Proof of Michigan no-fault insurance for all non-owned vehicles must be submitted.</p>
---	--

Number of In-transit Repair plates currently owned:
Describe how the In-transit Repair plate(s) will be used:

I certify I am eligible for the In-transit Repair plate(s) requested and that the assigned plates will only be used as noted above.

Signature X	Date
Printed Name	Driver's License Number

The Secretary of State reserves the right to determine the number of Repossession and In-transit Repair plates that may be issued to a qualifying entity.

Contact the Department of State Information Center at 888-SOS-MICH (888-767-6424) with any questions about this application. All Secretary of State offices accept cash, checks, money orders, MasterCard, Visa, and Discover credit and debit cards (a nominal service fee will be charged for credit and debit card usage).

If applying by mail please pay by check or money order payable to the State of Michigan. Return completed application, proof of insurance as described above, and fee to any Secretary of State office or mail to:

Michigan Department of State
Renewal by Mail Unit
Lansing, MI 48918