



# Children's Hospital of Wisconsin Information and Application

MV2993 1/2019 s. 341.14(6r) Wis. Stats.

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When you purchase Children's Hospital of Wisconsin license plates, your fee includes an annual \$25 tax-deductible donation. WisDOT will transfer this donation to [Children's Hospital of Wisconsin Foundation](#). The donation may be deductible if you itemize your income tax returns.

## Who is eligible?

- ▶ Any Wisconsin resident.

## Vehicles that qualify

Children's Hospital of Wisconsin license plates are available for:

- ▶ An automobile.
- ▶ A motor home (Annual registration only).
- ▶ A private truck, dual purpose motor home or dual purpose farm truck that has a gross weight of 8,000 pounds or less.
- ▶ A farm truck that has a gross weight of 12,000 pounds or less.

## Fees needed

- ▶ A **\$25** annual tax-deductible donation is required for original issuance of the Children's Hospital of Wisconsin license plates and each year at renewal.
- ▶ A **\$15** issuance fee or the **annual \$15** personalized plate fee.
- ▶ The **annual registration fee**, if your current plates expire within 3 months.

## Plates required in 2 days

- ▶ To legally operate your vehicle, you must display license plates within two business days of purchase.
- ▶ If you do not have current plates, apply to a DMV Customer Service Center or an agent authorized by DMV to obtain a temporary plate while your Children's Hospital of Wisconsin license plate order is processed. An agent may charge a plate fee and/or service fee.

## Personalized plate information

- ▶ A \$15 personalized plate fee is required **each** year in addition to the \$25 donation and regular registration fee.
- ▶ WisDOT may refuse to issue or may recall after issuance a request that is misleading or may be offensive to good taste or decency.
- ▶ No refund or adjustment will be made for a change of choice or spacing after the plate has been ordered or if the application is unclear or incorrectly completed.
- ▶ Plates will be mailed 3–4 weeks after you receive the new Certificate of Registration. When you purchase Children's Hospital of Wisconsin license plates, your fee includes an annual \$25 tax deductible donation. This donation WisDOT will transfer to Children's Hospital of Wisconsin.

## How to apply

- To order non-personalized Children's Hospital of Wisconsin plates, mark first option and go to step 6.
- To order personalized Children's Hospital of Wisconsin plates, mark second option and choose 1–6 characters. If you choose 6 characters, **no spaces are allowed**.

T	R	U	B	L	U
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If you choose 5 or fewer characters, you may request up to two spaces between any of the characters. Indicate this request with diagonal lines as shown here.

4	/	K	I	D	S
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- Use capital letters or numbers. The letter O and the number zero are the same. The following are not acceptable: small letters, symbols, signs, hyphens, apostrophes, etc. Carefully distinguish between: letters L or I and number 1, letter S and number 5, letter G and number 6, letter Z and number 2, letter B and number 8, letter U and letter V.
- For personalized plate message availability, please visit: [wisconsin.dmv.gov/personalizedplatelookup](http://wisconsin.dmv.gov/personalizedplatelookup).
- Provide a meaning for your request, i.e. what does this represent?
- If the vehicle that you wish to register with Children's Hospital of Wisconsin plates is already titled in your name, send:
  - » A copy of your Certificate of Registration or complete the vehicle description on the application.
  - » A \$15 issuance or personalized plate fee plus the annual registration fee if the current plates expire within the next 3 months.
  - » \$25 Children's Hospital of Wisconsin donation.
- If the vehicle is not titled in your name, send:
  - » A completed title application: [MV1](#) (Private Sale) or MV11 (Dealer Sale);
  - » The title assigned to you.
  - » All required fees, including annual registration fee;
  - » Additional \$15 issuance or personalized plate fee;
  - » \$25 Children's Hospital of Wisconsin donation.
- Make check or money order payable to: **Registration Fee Trust**.
- Mail all required items to:
 

**WisDOT  
Special Plates Unit  
P.O. Box 7911  
Madison, WI 53707-7911**



# Children's Hospital of Wisconsin License Plate Application

Wisconsin Department of Transportation

MV2993 1/2019 s. 341.14(6r) Wis. Stats.

## Check options

- I would like **non-personalized** Children's Hospital of Wisconsin plates.
- I would like **personalized** Children's Hospital of Wisconsin plates.

### If all personalized choices are not available:

- I would like non-personalized Children's Hospital of Wisconsin plates.
- Call or Email me.



### If you have questions about this application:

- » Call: (608) 266-3041
- » Fax: (608) 267-5106
- » Email: [special-plates.dmv@dot.wi.gov](mailto:special-plates.dmv@dot.wi.gov)

First Choice							Meaning
Second Choice							Meaning
Third Choice							Meaning

## Vehicle you wish to register with the Children's Hospital of Wisconsin plates.

Current License Plate Number 1 2 3 4 5 6 7 8	Year - Make	Body Type	Vehicle Identification Number (standard VIN has 17 characters) 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17
Driver License Number 1 2 3 4 - 5 6 7 8 - 9 10 11 12 - 13 14	OR		FEIN (if company owned) 1 2 - 3 4 5 6 7 8 9
Telephone Number where you may be reached 7 a.m. to 4:30 p.m.			
Owner(s)/Lessee Name - Last, First, Middle Initial - Print		Email Address	
Address		City	State ZIP Code

X  
(Applicant Signature) (Date)

## Release of personalized plates

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- I authorize the reissuance of my personalized plate number to the applicant listed above.

X  
(Signature of Owner Releasing Plate)

### New owner - please check one:

- Have plates in good condition in my possession.
- Need new plates issued.

**Note:** No credit of registration fees or personalized plate fee from former owner is allowed.

### Release of non exempt information

Under Wisconsin open records law, the Wisconsin Department of Transportation must provide information from its records to requesters.

If you do not want your name and address included in requests we receive for ten or more records, you may ask the department to withhold your name and address from those lists by checking the box below:

- Opt Out

ADA - The Wisconsin Department of Transportation complies with the Americans with Disabilities Act.

Invisible disability notice to law enforcement form: [wisconsin.dmv.gov/inv-dis](http://wisconsin.dmv.gov/inv-dis) or at DMV Service Centers.