

FLEET OWNERS REQUEST FOR COMMON REGISTRATION EXPIRATION DATE

• Minimum of 10 vehicles required •

Submit three copies of this application to your County Motor Vehicle office for processing.

After fleet number has been assigned by the State, appropriate copies will be sent to the county and fleet owner.

Type or print all information.

Company Name					
Owner Name					
Title Address			City	State	ZIP
Principal Office County	Principal Fleet Management Facility County		Average Number of Vehicles in Fleet (minimum of 10 vehicles)		
Requested Month of Expiration for all Vehicles					
Signature				Date	
If the vehicles are to be registered in more than one county, list below each county and the number of vehicles per county.					
COUNTY	NUMBER	COUNTY	NUMBER	COUNTY	NUMBER
PRINCIPAL COUNTY USE ONLY			DEPARTMENT USE ONLY		
Date Accepted			Date Accepted	Clerk's Initials	
County			Fleet Number Assigned		
County Clerk's Signature					