



MISSOURI DEPARTMENT OF
REVENUE
Application for Repossessed Placard(s)

Instructions To Applicant

Any false statement is a violation of the law and may be punished by fine, imprisonment or both. ([Section 301.420 RSMo.](#))

1. Complete the application in full. Application should be typewritten or printed legibly (print firmly so that all copies are readable).
2. Fees – Fees are \$50.00 for the original placard, additional placards are \$10.50 each. If a placard is lost, stolen or destroyed, you may apply for a replacement placard at \$8.50 per placard. In order to obtain a replacement placard, the application must be notarized. Submit a check or money order (do not send cash) for the correct amount made payable to the Missouri Department of Revenue. Note: The Missouri Department of Revenue may electronically resubmit checks returned for insufficient or uncollected funds.
3. When the application is completed, return all copies to the address listed below. The placard(s) will be mailed to the applicant by the motor vehicle bureau after the application has been approved.

Applicant Information

| | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------|-------------------------------------|
| Number Of Placard(s) Requested | | Repossessed Placard Number(s) Assigned | |
| Business Name | | | Telephone Number (____)____-____ |
| Street Address | | | County |
| City | | State | Zip Code |
| I hereby certify that the information given herein is correct and that the placard(s) applied for will be used in accordance with the laws of the State of Missouri. The signature below shall certify that I have and will maintain, during the period of registration, financial responsibility with respect to each motor vehicle that I own, license or operate on the streets or highways. | | | |
| Signature of Applicant | | | Date (MM/DD/YYYY) __/__/____ |

Replacement Placard(s)

Reason Required
 Lost Stolen Mutilated Destroyed

List repossessed placard(s) to be replaced:

| | | | |
|----------------|--------------------|----------------|--------------------|
| Placard Number | New Placard Number | Placard Number | New Placard Number |
| Placard Number | New Placard Number | Placard Number | New Placard Number |
| Placard Number | New Placard Number | Placard Number | New Placard Number |
| Placard Number | New Placard Number | Placard Number | New Placard Number |

Notary Information

Note: License Office notary service - \$2.00

| | | | |
|-----------------------------------------|--------------------------------------|-------------------------------|--------------------------------------------------|
| Embossed or black ink rubber stamp seal | Subscribed and sworn before me, this | | |
| | day of _____ year | | |
| | State | County (or City of St. Louis) | My Commission Expires (MM/DD/YYYY) __/__/____ |
| | Notary Public Signature | | |
| Notary Public Name (Typed or Printed) | | | |

Mail to: Motor Vehicle Bureau
 Dealer Licensing Section
 P.O. Box 43
 Jefferson City, MO 65105

Phone: (573) 526-3669
Fax: (573) 751-4789
E-mail: dealerlic@dor.mo.gov

Visit <http://dor.mo.gov/>
 for additional information.

