TRIEU LAW

DESIGNATION OF MOBILITY IMPAIRED LICENSE PLATE

I, _____ (mobility impaired individual), do hereby designate my special mobility impaired license plate to the following vehicle:

VEHICLE OWNER'S NAME: _____

VEHICLE YEAR, MAKE, & MODEL: _____

VEHICLE IDENTIFICATION NUMBER: _____

SIGNATURE OF MOBILITY IMPAIRED
INDIVIDUAL OR REPRESENTATIVE: _____

ASSENT & ACCEPTANCE OF DESIGNATED PLATE BY VEHICLE OWNER

I, _____ (name of vehicle owner), do hereby accept the license plate as herein designated on the described vehicle which is owned by me. I understand that this license plate may by cancelled at the will of the mobility impaired person upon rendering written notice to me and to the Department of Public Safety & Corrections. I further understand that I am required to surrender the plate to the department upon receiving such written notice, or upon the death of the mobility impaired person.

SIGNATURE OF VEHICLE OWNER: _____

ASSENT & ACCEPTANCE OF DESIGNATED PLATE BY VEHICLE LESSEE

I, _____ (name of lessee), do hereby accept the license plate as herein designated on the described vehicle which is leased by me. I understand that this license plate may be cancelled at the will of the mobility impaired person upon rendering written notice to me and the Department of Public Safety & Corrections. I further understand that I am required to surrender the plate to the department upon receiving such written notice, or upon the death of the mobility impaired person.

SIGNATURE OF LESSEE: _____

Plate No. _____ Office No._____ Operator Code _____ Issue Date _____