



**APPLICATION FOR DUPLICATE REGISTRATION CARD FOR CUSTOMER PRINTED CREDENTIAL**

**For Department Use Only**  
 Bureau of Motor Vehicles • P.O. Box 68596 • Harrisburg, PA 17106-8596

This application is to be used to request a duplicate registration card when an error occurred which would not permit the permanent credential to be printed at the time of the online registration transaction. This form must be submitted within 30 days of the online transaction by the customer. No fee is required. Please submit your completed application to the address listed above.

If the online transaction was completed more than 30 days ago, this form may not be used and Form MV-44, "Application for Duplicate Registration Card, Replacement of Registration Plate or Weight Class Sticker," must be completed and fees paid.

<b>A APPLICANT AND VEHICLE INFORMATION AS LISTED ON CURRENT REGISTRATION CARD</b>				
Title Number	Vehicle Identification Number	Registration Plate Number	Expiration Date MO:      YR:	
Last Name (or Full Business Name)	First Name	Middle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth
Last Name	First Name	Middle Name	PA DL/Photo ID#	Date of Birth
Street Address				
City		State	Zip Code	
<b>B APPLICANT(S) SIGNATURE</b>				
I/We hereby certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I/we understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500 and/or imprisonment up to 1 year (18 Pa.C.S. Section 4904[b]).				
_____ Signature of Applicant or Authorized Signer			(      ) Telephone Number	
_____ Signature of Co-Applicant/Title of Authorized Signer			_____ Date	

Visit us at [www.dmv.pa.gov](http://www.dmv.pa.gov) or call us at:

In state: 1-800-932-4600 ♦ TDD: 1-800-228-0676 ♦ Out-of-State: 1-717-412-5300 ♦ TDD Out-of-State: 1-717-412-5380