

**DELTA SIGMA THETA SORORITY, INC.
BROOKLYN ALUMNAE CHAPTER**

CUSTOM PLATE ORDER FORM

The Brooklyn Alumnae Chapter of Delta Sigma Theta Sorority, Inc. is pleased to announce the offering of Delta Sigma Theta Custom License Plates.

Mail to: Brooklyn Alumnae Chapter, Custom Plates
P.O. Box 470913
Brooklyn, New York 11247



ELIGIBILITY: You must be a member of Delta Sigma Theta Sorority, Inc. Submission of any false information may result in the prevention and/or revocation of your privilege to have Delta plates under section 392 of the Vehicle & Traffic Law, and regulations set forth by the Commissioner. This form will be accepted when accompanied by an accepted method of payment and General Consent for Release of Personal Information is signed and notarized.

Standard Custom Plate Initial Cost.....\$53.00

Standard plates consisting of three numbers ranging from 100-999 followed by the letters DST will be issued in sequence by DMV according to the next available number. (\$10 goes directly to BROOKLYN ALUMNAE for Fundraising purposes.) There is a \$25 annual renewal fee in addition to your regular registration fee, which is billed every two years at the time of your renewal.

Personalized Custom Plate Initial Cost.....\$80.50

(\$12.50 goes directly to BROOKLYN ALUMNAE for Fundraising purposes.) There is a \$50 annual renewal fee in addition to your regular registration fee, which is billed every two years at the time of your renewal.

IF YOUR REGISTRATION EXPIRES IN 60 DAYS OR LESS, YOU MUST RENEW IT BEFORE YOU CAN APPLY FOR THESE PLATES.

BROOKLYN ALUMNAE CHAPTER

APPLICATION FORM

PLEASE ALLOW 4-8 WEEKS FOR PROCESSING.

I would like to order: Standard Plates for \$53.00 Personalized Plates for \$80.50*
(Number will be assigned by DMV)

**For personalized plates, you may select a combination of up to six (6) letters, numbers, and spaces. The first choice that is available will be ordered. You must include at least one letter.*

1st Choice 2nd Choice 3rd Choice

Current N.Y. State vehicle plate number _____ Class of Vehicle: Passenger Commercial

Name (as it appears on current registration): _____ Registration Expiration Date: _____

Last: _____ First: _____ Middle Initial: _____

Current Address: _____

Date of Birth: _____ Daytime phone number: _____ (____) _____

Membership No. _____ Name when initiated _____ Chapter of Initiation _____

Make Checks or Money Order payable to Brooklyn Alumnae Chapter of Delta Sigma Theta Sorority, Inc.

NYS – DMV GENERAL CONSENT FOR RELEASE OF PERSONAL INFORMATION

I _____, authorize the New York State Department of Motor Vehicles to disclose or otherwise make available to Houghton College, my name, address, plate number and registration information during the time period in which I hold Houghton College plates issued by DMV.

STATE OF _____

COUNTY OF _____

On this _____ day of _____ before me personally appeared _____
(1st, 2nd) (Month) (Year)

to me known and who by being duly sworn, acknowledged to be person described in and who executed the foregoing consent and he/she duly acknowledged to me that he/she executed the same.

Notary Public