



UNITED STATES AIR FORCE AUXILIARY
CIVIL AIR PATROL

HEADQUARTERS
PENNSYLVANIA WING
BLDG 3-108, FT INDIANTOWN GAP, ANNVILLE PA 17003
PHONE: 717-861-2335 EMAIL: HQ@PAWG.CAP.GOV

17 DECEMBER 2015

MEMORANDUM FOR PA WING MEMBERS
FROM: ROY LONG, Lt Col, CAP
SUBJECT: CAP Specialty Plate Application and fee.

1. Effective immediately, the price for a Pennsylvania CAP Specialty Plate is now \$32. The total cost reflects the updated, combined costs of \$25 due to PennDOT and \$7 processing for the Department of Corrections.
2. Each Specialty Plate will display the CAP Seal, and contain a five-digit number with the letters "CP" on the right hand side.
3. Specialty Plates will look similar to the image below:



4. Plate numbers are issued sequentially and, distributed on a first-come, first-served basis.
5. To apply for your license plate, complete the following steps.
 - a. Complete the attached PennDOT application
 - b. **DO NOT COMPLETE SECTIONS B & C.** Wing HQ will complete these sections.
 - c. Complete Section A, and sign in Section D.
 - d. Mail the completed, signed application, along with \$32 to:

HEADQUARTERS, Pa Wing Civil Air Patrol
ATTN: Specialty License Plate
Bldg 3-108 Ft Indiantown Gap Anville PA 17003

6. MAKE CHECKS for \$29 PAYABLE TO: PAWG CAP
7. DO NOT MAIL APPLICATIONS DIRECTLY TO PENNDOT. PennDOT will reject any applications mailed to them, and this will delay the process.
8. PennDOT will mail finished plates directly to the address listed on your application.

ROY A. LONG, Lt Col, CAP



APPLICATION FOR SPECIAL ORGANIZATION REGISTRATION PLATE
(PLEASE ALLOW 4-6 WEEKS FOR DELIVERY)

For Department Use Only
Bureau of Motor Vehicles • PO Box 68293 • Harrisburg, PA 17106-8293

A VEHICLE DESCRIPTION AND APPLICANT INFORMATION (Complete this section exactly as information appears on current registration card.)

Title Number	Registration Plate Number	Expiration Date	Make of Vehicle	Year	
Last Name (or Full Business Name)	First Name	Middle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth	Telephone Home () _____ Office () _____
Street Address - Must list a street address. P.O Box # alone is not acceptable.			City	State	Zip Code

NOTE: In conjunction with replacement of your plate, you will receive one registration card. If additional registration cards are desired, the fee is \$2 for each card. **Number of Duplicate Registration Cards Requested @ \$2 each** _____.

B TO BE COMPLETED BY ORGANIZATION OFFICIAL

NAME OF ORGANIZATION:

Name of Organization, Chapter, Post, Lodge, Employer, etc.

Street Address City State Zip Code

C TO BE COMPLETED BY ORGANIZATION OFFICIAL (See special instructions on reverse.)

I certify that the individual named in Section A is a member in good standing of the organization listed in Section B.

NAME OF ORGANIZATION OFFICIAL TITLE SIGNATURE

D OPTIONAL PERSONALIZATION REQUEST (NOTE: Additional \$100 Fee Required.)

Personalized registration plate choices may contain up to **FIVE** letters or numbers in combination. **ONLY** one hyphen or space is permitted, but not both as part of the available spaces for personalization. No other special characters are available. Please print clearly. Additional instructions and fees are listed on the reverse side of this application. **NOTE:** The pre-printed, shaded, stacked boxes are characters specific to this registration plate and cannot be changed.

FIRST CHOICE

SECOND CHOICE

THIRD CHOICE

E APPLICANT SIGNATURE

I certify that all information given on this application is TRUE and CORRECT and that when I cease to be a member of the above named organization, I will immediately return the registration plate to PennDOT.

X _____
APPLICANT'S SIGNATURE IN INK DATE