



Missouri Department of Revenue
Temporary License Plate Application

Applicant Information	Name		
	Address		
	City	State	Zip Code
	County	Telephone Number (_____) _____ - _____	

Vehicle Information	Year	Make	License Plate Number
	Vehicle Identification Number		

Certification and Signature	Any false statement in this application is a violation of the law and may be punished by fine or imprisonment or both. I certify that I am the owner of the above referenced motor vehicle. I understand that the temporary license plate only authorizes the use of the vehicle when the actual matching plate is valid and affixed to the vehicle as prescribed by law. Furthermore, I understand that the temporary license plate is to be placed in the interior of the vehicle's rear window sufficiently as to not obstruct the driver's view and so that the plate configuration is clearly visible when the actual rear license plate cannot be viewed.	
	Signature	
	Printed Name	Date (MM/DD/YYYY) ____ / ____ / _____

Please mail your completed application and check made payable to the Department of Revenue for \$8.50 (\$5.00 license fee and \$3.50 processing fee) to the address listed below.

Form 5429 (Revised 01-2015)

Mail To: Motor Vehicle Bureau
 P.O. Box 2076
 Jefferson City, MO 65105-2076

Phone: (573) 526-3669
E-mail: mvbmail@dor.mo.gov



Visit <http://dor.mo.gov/motorv/licplate.php#templicplate>
 for additional information.