

**OHIO BUREAU OF MOTOR VEHICLES
REQUEST FOR FOPA LICENSE PLATES**

PRINT or **TYPE** name as it appears on the Ohio Certificate of Title. If vehicle is leased, include lessor's name and address.

NAME	LODGE	HOME PHONE
STREET ADDRESS		BUSINESS PHONE
CITY	STATE OH	ZIP CODE
DATE OF BIRTH		SOCIAL SECURITY NUMBER
VEH SERIAL NUMBER	CURRENT LIC PLATE NUMBER	
IS THIS A LEASED VEHICLE YES NO	IF YES, COMPLETE THE LESEE INFORMATION	
LESSOR'S NAME	SOCIAL SECURITY NO. OR TAX ID NO.	COUNTY
STREET ADDRESS	CITY	STATE ZIP CODE OH

ASSOCIATE MEMBER



The above referenced individual is a member in good standing of the Fraternal Order of Police **ASSOCIATES** of Ohio, Inc. and may purchase F.O.P.A. License Plates for the vehicle described on this form provided the vehicle is titled or leased in his/her name.

Issued by: _____ Date: _____
signature required to be valid

Certificate of Membership is valid one (1) year from date of issue.