



APPLICATION FOR SPECIAL AMATEUR RADIO LICENSE PLATES

TITLE AND REGISTRATION DIV TENNESSEE DEPT. OF SAFET 44 VANTAGE WAY, SUITE 160 NASHVILLE, TENNESSEE 3724	Y		
DEAR SIR:			
I wish to make application for	(quantity)) Special Amateur Radio License Plate(s).	
Auto Moto	orcycle (Please indicate type	e of plate needed)	
FEDERAL COMMUNICATION C	OMMISSION CALL SIGN_		
FCC OPERATOR PRIVILEGES_			-
EFFECTIVE DATE	EXPIRA	TION DATE	
NAME OF APPLICANT	PLE	EASE PRINT	-
STREET ADDRESS			_
CITY	STATE	ZIP	
COUNTY	TE	ELEPHONE # ()	

I certify that I am the recipient of the F.C.C. Amateur Radio Operator License referred to above, a copy of which is attached, that I am a resident of the State of Tennessee and I have been issued a Tennessee Certificate of Title, or have applied for same, for the vehicle on which the special plate(s) herein requested will be registered.

SIGNED______

NOTE TO APPLICANT: DO NOT SEND ANY MONEY WITH THIS APPLICATION.