Form 751-J Revised 2/2025 MVC





DV

Application for a Disabled American Veteran License Plate

Applicant must be at least 50% service connected disabled to qualify.

The name of the Disabled American Veteran must appear on the	Fee:	\$5.00
face of the title. This license plate will replace the license plate	Insurance Fee:	1.50
currently on your vehicle. The initial issuance will be from this office. Subsequent renewals may be processed at a local tag	Total Fee (<u>if picked up</u>):	\$6.50
office or Service Oklahoma. Complete this application and mail it to the address on Page 2 of this form.	Mail Fee:	6.60
		6.60
	Total Fee (<u>if mailed</u>):	\$13.10
Titled in the Name of	Please allow 4 weeks for pr	ocessing.
Address	Your drivers license number n your check.	nust appear on
	,	
City, State, Zip Code	For Service Oklahoma	a Use Only
	DAV Plate Number	
Telephone Number Drivers License Number		
	Decal Number	
Email Address (Optional)		
· · ·		
You may choose only one type of Disabled	American Veteran license plate.	
DAV plate without the international accessibility symbol.		
DAV plate with the international accessibility symbol. You placard issued by Service Oklahoma in the spaces provided by	-	of your parking
My physically disabled parking placard number	expires	. 20
, prijeteanj aleaziea parking placara nameo.		
DAV Motorcycle plate without the international accessibility s	ymbol.	
I certify that Disabled American Veteran license plate will be display	yed on a vehicle with a description as	s follows:
Title Number Vehicle Identification Number Year a	and Model License Plate Number	Month and Year of Expiration
By signing below, I hereby affirm, under penalties of perjury, that I u	understand all other plates will be cea	·
of a new specialty plate.		
Signature:		

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I certify that I	(Name of DAV)	am the principal driver of this vehicle,	
which is titled in the name of my	(Relationship to	DAV)	
Signature of Applicant			

Instructions

The following items must accompany your completed application.

- 1) Your remittance made payable to Service Oklahoma.
- 2) A current insurance verification form.
- 3) A copy of the Reduced Licensing Charge Card Form 599 issued by the Oklahoma Department of Veteran Affairs (DO NOT send original, it will not be returned), or a letter issued by the Oklahoma Department of Veteran Affairs for the purpose of registering your vehicle (This is not the letter issued by the Oklahoma Department of Veteran Affairs which indicates the percentage of disability.).
- 4) The Disabled American Veteran's name must appear on the face of the title <u>or</u> you must be the principal driver of the vehicle. If you are not the owner, but are the principal driver of the vehicle the following statement must be completed.

Service Oklahoma PO Box 26940 Oklahoma City, OK 73126-0940

(In-State toll free) 800-522-8165 405-521-2468

https://service.ok.gov