



Virginia Department of Motor Vehicles  
Post Office Box 27412  
Richmond, Virginia 23269-0001  
www.dmv.virginia.gov

## MILITARY SURPLUS LICENSE PLATE APPLICANT CERTIFICATION

**Purpose:** Owners of military surplus motor vehicles use this form to certify compliance with Code of Virginia requirements for use of military surplus license plates.

**Instructions:** Return the completed VSA10M form (along with a VSA10, VSA14, or VSA17A) with the one-time \$100 fee and any other applicable fees to any DMV Customer Service Center. You may also mail forms and fees to DMV, Titling Work Center, P.O. Box 27412, Richmond, Virginia 23269-0001.

APPLICANT INFORMATION			
OWNER FULL NAME (last, first, middle initial) (print)		OWNER TELEPHONE NUMBER	
CO-OWNER FULL NAME (last, first, middle initial) (print)		CO-OWNER TELEPHONE NUMBER	
STREET ADDRESS	CITY	STATE	ZIP CODE

USE OF ANOTHER VEHICLE, MOTORCYCLE OR AUTOCYCLE					
Virginia Code § 46.2-730.1 requires evidence that the applicant named above owns or has regular use of a passenger car, motorcycle or autocycle. Military surplus license plates will not be issued without this evidence. The vehicle must have active registration. If the registration is inactive or the information is incorrect, the request for license plates will not process.					
<input type="checkbox"/> I certify that I own at least one other properly registered vehicle, motorcycle or autocycle. (Describe below)					
VEHICLE TITLE NUMBER	VEHICLE IDENTIFICATION NUMBER (VIN)		MAKE	MODEL	LICENSE PLATE NUMBER
<input type="checkbox"/> I do not own another properly registered vehicle, motorcycle or autocycle; however, I certify that I have regular use of at least one other properly registered vehicle, motorcycle or autocycle as authorized by the owner/co-owner below.					
VEHICLE TITLE NUMBER	STATE OF TITLE	VEHICLE IDENTIFICATION NUMBER (VIN)	MAKE	MODEL	LICENSE PLATE NUMBER
OWNER FULL NAME (last, first, middle initial) (print)			OWNER SIGNATURE		
CO-OWNER FULL NAME (last, first, middle initial) (print)			CO-OWNER SIGNATURE		

INSURANCE CERTIFICATION	
<input type="checkbox"/> I/We certify that this vehicle is insured by a liability policy issued through an insurance company licensed to do business in Virginia and it will remain insured while registered, whether or not it is operated. Penalties are severe for violation of this requirement.	NAME OF INSURANCE COMPANY

USE OF MILITARY SURPLUS PLATES
Virginia Code § 46.2-730.1 limits military surplus motor vehicles with military surplus license plates to the participation in off-road events, on-road club activities, exhibits, tours, parades and similar events. They may also be used on Virginia highways for the purposes of selling the vehicle, obtaining repairs or maintenance. Military surplus license plates permit occasional pleasure driving (not to exceed 125 miles from the address where the vehicle is stored for use) but are not to be used for general transportation purposes, including, but not limited to daily travel to and from the owner's place of employment.

PENALTY FOR MISUSE OF MILITARY SURPLUS PLATES
Any owner of a military surplus motor vehicle registered with license plates pursuant to Virginia Code § 46.2-730.1 will be guilty of a Class 4 misdemeanor if convicted of a violation of military surplus plate usage. The conviction will cause the owner's registration for the vehicle involved in the violation to be revoked for a five-year period from the date of conviction.

VEHICLE SAFETY CERTIFICATION					
Virginia Code § 46.2-730.1 requires that you certify that the military surplus motor vehicle registered with military surplus license plates is capable of being safely operated on Virginia highways.					
VEHICLE TITLE NUMBER	VEHICLE IDENTIFICATION NUMBER (VIN)	MAKE	MODEL	LICENSE PLATE NUMBER	
I/We certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/We make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.					
OWNER SIGNATURE		DATE (mm/dd/yyyy)	CO-OWNER SIGNATURE		DATE (mm/dd/yyyy)