



MVC

**SERVICE OKLAHOMA - MOTOR VEHICLE SERVICES
AFFIDAVIT FOR PHYSICALLY DISABLED REGISTRATION FEE**

I, the undersigned affiant, being first duly sworn upon my oath, state and certify that I am the owner, or legal agent of the owner, of the following vehicle:

_____ Oklahoma Tag Number

_____ Vehicle Identification Number

I further state the above described vehicle has had modifications made as a direct result of physical disability of the owner, or of an individual related to the owner within the second degree of consanguinity (parent, grandparent, child, grandchild, or sibling by blood). The following is a **detailed description** of the modifications made to the vehicle.

Service Oklahoma Handicapped Parking Insignia Number: _____

Name of Insignia Holder: _____

Relationship to Vehicle Owner: _____

Pursuant to the above, I hereby make application for handicapped registration under the provisions of Oklahoma Statutes Title 47 Section 1136.

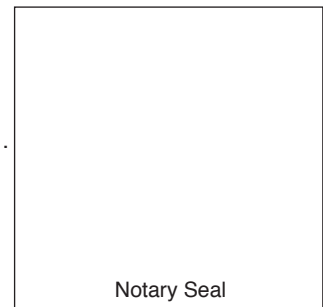
Affiant

State of _____, County of _____ §:

Subscribed and sworn to before me this _____ day of _____, _____.

My commission expires: _____, _____.

_____, Notary Public



Notary Seal