

Check one:

I would like nonpersonalized Disabled plates.

I would like personalized Disabled plates.

First Choice						
Meaning of First Choice						
Second Choice						
Meaning of Second Choice						
Third Choice						
Meaning of Third Choice						

Choose 1-6 characters. If you choose 6 characters, no spaces are allowed.

A M B U L 8

If you choose 5 characters, you may request up to 2 spaces between any of the characters. Indicate this request with diagonal lines as shown here.

I / M / A B L

Use capital letters or numbers. The letter O and the number zero are the same. The following are not acceptable: small letters, symbols, signs, hyphens, apostrophes, etc.

Carefully distinguish between:
Letters L or I and Number 1
Letter S and Number 5
Letter G and Number 6
Letter Z and Number 2
Letter B and Number 8
Letter U and Letter V

Note: If requested personalized plate choices are not available, nonpersonalized Disabled plates will be issued.

GENERAL INFORMATION

- ◆ Only 1 Disabled Parking Identification (DIS ID) Card may be issued to persons with "Disabled" license plates.
- ◆ When using the DIS ID, **you MUST keep a copy of this completed application and provide it for inspection upon request by any traffic officer.** Make and keep a copy **before** submitting application to WI DOT.
- ◆ If you currently have valid Permanent (Blue) DIS ID cards, a certification is not required at this time. If you have two (2) cards, one must be returned with this application.
- ◆ The Department may cancel a "Disabled" license plate which was issued as a result of fraud or error or that is used by anyone not authorized.
- ◆ To legally operate your vehicle, you must display license plates within 2 business days of purchase. If you do not have current plates, apply to a DMV Customer Service Center for a standard Disabled plate or an agent authorized by DMV to obtain a temporary plate while your Disabled plate order is processed. An agent may charge a \$3 plate fee and/or may also charge a \$5 service fee.

PERSONALIZING INFORMATION

- ◆ A \$15 personalized plate fee is required **EACH** year in addition to the annual registration fee.
- ◆ No refund or adjustment will be made for a change of choice or spacing after the plate has been ordered, or if the application is incorrectly or unclearly completed.
- ◆ The department may refuse to issue OR may recall after issuance, a request which may be offensive to good taste or decency, misleading or conflict with any other license plates.
- ◆ Allow 4-6 weeks for the manufacturing process, after the Certificate of Registration is issued.
- ◆ Disabled cycle plates cannot be personalized.

DISABLED LICENSE PLATES USE

A motorist who displays disabled license plates on their vehicle:

- ◆ Is exempt from any parking ordinance imposing time limits of one-half hour or more, but is otherwise subject to the laws relating to parking;
- ◆ Can park at a municipally-owned/leased lot without payment in **metered spaces** when the time limit is one-half hour or more;
- ◆ May park in spaces marked by official traffic signs reserving the space for vehicles displaying VET or DIS plates or DIS ID cards;
- ◆ May obtain, upon request, motor fuel from a full-service pump at the same price as fuel from a self-service pump, if the driver is the person with the disability. This applies at locations where fuel is sold at retail from both full and self-service pumps. The retailer is not required to provide any other service that is not provided to customers who use a self-service pump.

RELEASE OF NONEXEMPT INFORMATION

The Wisconsin Department of Transportation uses the information on this form to issue disabled parking identification cards and plates. Under open records laws, the Department must make nonexempt information available upon request. Do you want your name withheld from mailing lists of 10 or more individuals?

Yes. This will remove your name from marketing lists.

No.



Disabled Parking License Plates

Information and Application

Wisconsin Department of Transportation
MV2162

QUALIFYING PERSONS

A "Disabled" license plate may be issued for a person with a **permanent disability that limits or impairs ability to walk**, who is the:

- ◆ Owner;
- ◆ Lessee;
- ◆ Regular Attendee of a person with a disability;
- ◆ Employer providing a vehicle;
- ◆ Beneficiary of a trust.

QUALIFYING VEHICLES

The following vehicles qualify for "Disabled" license plates:

- ◆ Automobiles
- ◆ Motor homes (Annual registration only);
- ◆ A private truck, dual purpose motor home or dual purpose farm truck which has a gross weight of 8,000 pounds or less;
- ◆ A farm truck which has a gross weight of 12,000 pounds or less;
- ◆ Motorcycles (Nonpersonalized only).

Are you eligible?

Any person certified by an authorized health care specialist as having a **permanent** disability is eligible for the Disabled Parking License Plates. By legal definition, this includes any person who:

- ◆ Cannot walk 200 feet or more without stopping to rest;
- ◆ Cannot walk without the use of, or assistance from, another person or brace, cane, crutch, prosthetic device, wheelchair or other assistance device;
- ◆ Is restricted by lung disease to the extent that forced expiratory volume for 1 second when measured by spirometry is less than one liter or the arterial oxygen tension is less than 60 mm/hg on room air at rest;
- ◆ Uses portable oxygen;
- ◆ Has a cardiac condition to the extent that functional limitations are classified in severity as class III or IV, according to standards accepted by the American Heart Association;
- ◆ Is severely limited in the ability to walk due to an arthritic, neurological or orthopedic condition.

If you have questions about disabled parking license plates:

- ◆ Call: 608-266-3041
- ◆ FAX: 608-267-5106
- ◆ E-mail: special-plates.dmv@dot.state.wi.us
- ◆ Write to the address shown above.

AMERICANS WITH DISABILITIES ACT

The Wisconsin Department of Transportation complies with the Americans with Disabilities Act.

HOW TO APPLY

1. Complete Applicant Section
2. Have health care provider complete Health Care Certification. (Not required if applicant has valid Permanent DIS ID card)
3. **If you request a DIS ID card, you MUST keep a copy of this completed application and provide it for inspection upon request by any traffic officer.** Make and keep a copy **before** submitting application to WIDOT.
4. If you want personalized Disabled plates, mark application and refer to back side of Applicant Section. If you want nonpersonalized Disabled plates, mark application.
5. If the vehicle that you wish to register with Disabled plates is already titled in your name, send the following items:
 - ◆ A copy of your Certificate of Registration OR the complete vehicle description on the application;
 - ◆ The annual registration fee if the current plates expire within the next 3 months;
 - ◆ An additional \$15.00 if applying for personalized plates.
6. If the vehicle is NOT titled in your name, send:
 - ◆ A completed title application (MV1 or MV11);
 - ◆ All required fees, including annual registration fee;
 - ◆ An additional \$15.00 if applying for personalized plates.
7. Make check or money order payable to: **Registration Fee Trust.**
8. Mail this application with payment to: **Wisconsin Department of Transportation Special Plates Unit - DIS PO Box 7306 Madison WI 53707-7306**

Disabled Parking License Plates Application

MV2162 5/2008 s.341.14(1a) Wis. Stats.

APPLICANT SECTION

- Check if you would also like 1 Disabled Parking Identification Card (DIS ID).

Registration for Vehicle Owned/Leased by- Check one:

- Person with disability.
 Person who regularly attends person with disability. Print name and sign below.
 Employer who provides vehicle to person with disability. Print name and sign below.
 Trust whose beneficiary is person with disability. Complete and attach form MV2790. Sign below.

Please Print Clearly

Legal Name of Person with Disability - First, Middle Initial, Last	
Address	
City, State, ZIP Code	
Social Security Number - For Identification Purposes	
Month, Day, Year You Were Born	<input type="checkbox"/> Female <input type="checkbox"/> Male
Driver License/Nondriver Identification Number - If none, write NONE	
Telephone Number Where You May be Reached 7 a.m. - 4:30 p.m.	

I have read the information on this form and understand the qualifications and provisions under which "Disabled" license plates may be issued. I authorize my health care specialist to supply the information requested on this form.

(Signature of Person with Disability)

(Date)

If you regularly attend the person with a disability, or are a leasing company or employer print name and sign:

Print Name
Signature

Give information for the vehicle that you wish to register with Disabled plates.

Current License Plate Number	
Vehicle Year - Make	Body Type
Vehicle Identification Number	

HEALTH CARE CERTIFICATION

This must be completed and signed by any of the following health care specialists licensed to practice in any state: a physician, a podiatrist, an advanced practice nurse, a chiropractor, a public health nurse or physician assistant who is licensed or certified; or a Christian Science Practitioner residing in Wisconsin.

Note: Recertification is required every 4 years.

Please Print Clearly

Name of Person Certifying Eligibility
Address
City, State, ZIP Code
Medical License Number
Area Code and Office Telephone Number

If you feel the applicant's medical condition or disability may prevent them from exercising reasonable control over a motor vehicle, please contact the Medical Review Unit at 608-266-2327 or refer to <http://www.dot.wisconsin.gov/drivers/drivers/aging/impaired.htm> for the reporting process.

I certify that the applicant is **permanently** disabled according to the conditions specified on this application.

(Authorized Signature of Health Care Specialist)

(Date)