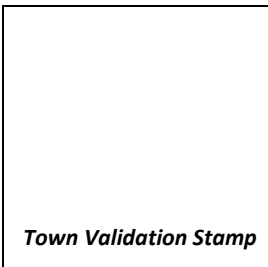




Department of the Secretary of State  
*Maine Bureau of Motor Vehicles*



**REQUEST FOR REPLACEMENT  
OF VALIDATION STICKER**

Town Validation Stamp

- |  |        |  |         |
|--|--------|--|---------|
| <input type="checkbox"/> 1 Single Sticker  | \$ .25 | <input type="checkbox"/> 1 Set of Double Stickers  | \$ .50  |
| <input type="checkbox"/> 2 Single Stickers | \$ .50 | <input type="checkbox"/> 2 Sets of Double Stickers | \$ 1.00 |

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Sticker (s) Issued:**

Month: \_\_\_\_\_ Control Number: \_\_\_\_\_

Year: \_\_\_\_\_ Control Number: \_\_\_\_\_

For use with Plate Number: \_\_\_\_\_ Class Code: \_\_\_\_\_

If no fee, please explain: \_\_\_\_\_

\_\_\_\_\_

Date: \_\_\_\_\_ Clerk: \_\_\_\_\_