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**DISABLED VETERAN LICENSE PLATE APPLICATION**  
**NRS 482.377/484.407**

A Veteran of the Armed Forces of the United States, who, as a result of his/her service, has suffered a 100-percent service connected disability and receives compensation from the United States for the disability, may apply for two sets of Disabled Veteran license plates for their personal use. The license plates may be used to register a passenger vehicle or light commercial vehicle for personal use.

Documentation from the Veteran's Administration must be presented with this application to verify the disability.

The vehicle bearing Disabled Veteran license plates is exempt from the payment of parking fees, including those collected through parking meters, charged by the State of Nevada, or any political subdivision or other public body within the State. Disabled Veteran license plates do not authorize the parking of a motor vehicle in any privately or municipally owned facility.

An owner or operator of a motor vehicle displaying special plates for a disabled veteran issued pursuant to [NRS 482.377](#) may park in a parking space designated for the handicapped (*NRS 484.407*) if:

- (a) The parking is done by a disabled veteran; or
- (b) A disabled veteran is a passenger in the motor vehicle being parked.

**PLEASE NOTE: These parking privileges are unique to Nevada and may not be applicable or honored in other states.**

No fees other than applicable registration fees and Governmental Services Taxes are assessed for the issuance or renewal of Disabled Veteran license plates.

If your vehicle is currently registered, you have the option of maintaining your current vehicle registration expiration date, or renewing for a full 12-month period. Credit for any unused portion of your current registration will be allowed. In applicable counties, if you are renewing for a full 12-month period, and your previous evidence of compliance with emissions standards was obtained more than 90 days ago, the vehicle must be reinspected prior to registration.

***Please Print or Type***

I hereby make application for a Disabled Veteran license plate. I have read and understand the conditions under which the license plate is to be issued.

Applicant's Name \_\_\_\_\_  
First Middle Last

Address \_\_\_\_\_  
City State Zip Code

Daytime Telephone No. (\_\_\_\_\_) \_\_\_\_\_

Signature of Applicant \_\_\_\_\_ Date \_\_\_\_\_