State of Alabama
Department of Revenue
(www.ador.state.al.us)

Sample Tag Order Form

Name: ___________________________________________________________________________________________

Address: _________________________________________________________________________________________

City: __________________________ State: _______________ Zip: __________________

Phone Number: (____)_____________ Email: ___________________________________________________________

Current Standard
Passenger Qty: _____________

Current Standard
Motorcycle Qty: _____________

Total Quantity Requested _____________ x $3.00 = $ ____________________

Please remit order form to:

Alabama Department of Revenue
Motor Vehicle Division
PO Box 327630
Montgomery, AL 36132-7630

Certified funds (i.e. money orders, bank checks, or certified checks) are the only acceptable forms of payment. PLEASE DO NOT SEND PERSONAL CHECKS OR CASH. The plates will be available as long as supplies last. Plate(s) will be mailed upon receipt of payment.