



# IRP Credential Replacement Application

Use this form to apply for replacement International Registration Plan (IRP) tabs, cab cards, and license plates. When completed, send this form and your total fees payable to the Department of Licensing, and any attachments to:

**Prorate and Fuel Tax, Department of Licensing, PO Box 9048, Olympia, WA 98507-9048**

If you have questions, call us at (360) 664-1858 or fax to (360) 570-7829.

For validation only

IRP/Prorate account number	Fleet number	Supplement number	Registration year	IFTA account number
Name of firm or person				
Email address			(Area code) Phone number	(Area code) Fax number
Mailing address				
City			State	ZIP code

Owner's equipment number	Vehicle identification number (VIN)	Year	Make	Vehicle type	Current plate number	Office use only New plate number	WA apportioned plate	Validation tab	Cab card	Total
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$
							\$	\$	\$	\$

**Check appropriate boxes:**  name change (*attach new registrations for all vehicles*)  lost/stolen  
 destroyed/mutilated  correction of information contained (*specify*) \_\_\_\_\_

*I certify under penalty of perjury under the law of Washington that the foregoing is true and correct.*

\_\_\_\_\_  
Contact person name and title

**X**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date and place

For office use only		
Date mailed	Apportioned plates	
Cab cards	Validation tabs	By

Fees
<b>Prorate identification replacement</b>
Validation tab ..... \$ 2.00 set
Cab card ..... \$ 2.00 each
<b>WA apportioned plate replacement</b>
Power unit ..... \$12.00 (Cab cards and decals included)
For permanent plates for trailing units contact a licensing agent.