Application for Exempt Registration of Certain Rescue Vehicles

Texas Department of Motor Vehicles

Instructions

This form must be completed for issuance of Texas Exempt License Plates for firefighting vehicles, vehicles owned by a volunteer fire department, privately owned county marine law enforcement and rescue vehicles, and vehicles owned by units of the U.S. Coast Guard Auxiliary headquartered in Texas.

These vehicles must display the organization's name on each side of the vehicle in letters at least two inches high or use an emblem at least 100 square inches in size in a color legible from at least 100 feet.

Submit the completed form and photo to your local county tax assessor-collector's office. If the vehicle is not currently titled, also submit an *Application for Texas Title and/or Registration* (Form 130-U). Contact your county tax assessor-collector if you have any questions.

Applicant Information

First Name (Owner or Authorized Agent)	Middle Name	Last Name	Suffix (if any)

Entity Name	Phone Number

Address

City	State	ZIP	County

Vehicle Information

Vehicle Identification Number	Current TX License Plate

Year	Make	Body Style

Firefighting Vehicle and Equipment Description (attach photo with application)

Certification - State law makes falsifying information a third degree felony.

I certify the vehicle referenced above is one of the following:

- Designed and used exclusively for firefighting;
- Owned by a volunteer fire department and used exclusively to conduct department business;
- Privately owned and used exclusively in county marine law enforcement activities, including rescue operations under the direction of the sheriff's department (Authorized Agent of Sheriff's Department must also sign); or
- Owned by units of the U.S. Coast Guard Auxiliary headquartered in Texas and used exclusively to conduct U.S. Coast Guard or U.S. Coast Guard Auxiliary business and operations, including search and rescue, emergency communications, and disaster operations.

_____   _____
Signature of Owner or Authorized Agent   Date

_____   _____
Signature of Authorized Agent of Sheriff's Department   Date