



**STATE OF DELAWARE
DEPARTMENT OF TRANSPORTATION
DIVISION OF MOTOR VEHICLES**

AFFIDAVIT FOR LICENSE PLATE SWITCH

I/We _____, _____

by the signing of this affidavit, do hereby give my/our permission for the purpose of switching my/our license plate number(s) _____, _____ to respective vehicle(s). I/We wish to give up my/our rights to this/these license plate number(s) listed above.

I/We certify, under penalty of perjury, that the statements made herein are true and correct to the best of my/our knowledge, information and belief.

Signature

Printed Name

Signature

Printed Name

SWORN TO AND SUBSCRIBED before me this _____ day of _____, 20____.

Notary Public

PLEASE FILM