

STATE OF NEW JERSEY

**INSTRUCTIONAL CHECKLIST**

**APPLICATION FOR VEHICLE LICENSE PLATES AND/OR PLACARD FOR  
PERSONS WITH A DISABILITY**

**PLEASE READ THESE INSTRUCTIONS CAREFULLY WHILE COMPLETING YOUR APPLICATION FORM. IF THE APPLICATION IS NOT FULLY COMPLETED, ACCURATE AND/OR LEGIBLE IT MAY CAUSE DELAYS IN RECEIVING YOUR PLATES AND/OR PLACARD.**

- CLEARLY INDICATE IF THE APPLICATION IS:  
INITIAL (FIRST TIME), RECERTIFICATION OR REPLACEMENT (PROPER BOX MUST BE CHECKED).**

**INITIAL APPLICATION (FIRST TIME):** The application process begins with the initial application, which is the same for either license plates and/or a placard. A “Person with a Disability Identification Card” is issued with the license plates and placard. This ID card must be carried by the person with a disability in conjunction with the use of the license plates/placard.

**RECERTIFICATION APPLICATION:** Medical recertification is required every three years. Persons with a disability will be required to provide a qualified medical practitioner’s certification indicating that the qualifying medical condition still exists in order to renew the plates and/or receive a new placard and a new Person with a Disability Identification Card.

**REPLACEMENT APPLICATION:** In the event that your plates and/or placard are lost, stolen or damaged, a replacement application is required. Notarized statements may be required to obtain new plates and/or a placard depending on the circumstance.

- CLEARLY INDICATE IF YOU ARE APPLYING FOR:  
LICENSE PLATES, A PLACARD OR BOTH (PROPER BOX MUST BE CHECKED).**

**LICENSE PLATES:** Wheelchair symbol license plates are renewed every year as part of the normal registration renewal process. In order to retain the plates, a medical recertification is required every three years. However, if the holder of the “Person with a Disability Identification Card” for whom the license plates were issued no longer qualifies for the license plates, it is the responsibility of the owner of the vehicle to surrender the wheelchair symbol license plates and apply for a new set of regular license plates at any MVC Agency.

**PLACARD:** A placard, in conjunction with the identification card, can be used in any vehicle you ride in, whether or not you own the vehicle. The placard authorizes the driver of the vehicle to park in designated wheelchair symbol parking spaces when the individual designated on the identification card is either driving or a passenger in the vehicle. Since the placard is transferable from vehicle to vehicle, only one placard will be issued to each qualified applicant. There is no charge for the placard.

**SECTION A: PERSON WITH A DISABILITY IDENTIFICATION CARD INFORMATION**

- PROVIDE APPLICANT INFORMATION FOR THE PERSON WITH A DISABILITY (DRIVER LICENSE NUMBER, EXPIRATION DATE, DOB, SEX, EYES, HEIGHT AND WEIGHT).**
- COMMERCIAL DRIVER LICENSE (CDL) HOLDERS MUST ACKNOWLEDGE POSSIBLE MEDICAL REVIEW (BOX MUST BE CHECKED).**
- PROVIDE PLACARD NUMBER AND/OR LICENSE PLATE NUMBER FOR RECERTIFICATION AND REPLACEMENT APPLICATIONS.**

**IDENTIFICATION CARD:** A “Person with a Disability Identification Card” is issued with either the license plates and/or a placard and is valid as long as the person continues to be recertified. When using either the license plates or placard to park in designated wheelchair symbol parking spaces, you must have your identification card with you. The ID card is non-transferable and will be forfeited if presented by any other person.

**ELIGIBILITY:** Any person who has lost the use of one or more limbs, or is permanently disabled and cannot move about without

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STATE OF NEW JERSEY

**Chris Christie**  
Governor

**Kim Guadagno**  
Lt. Governor

**Raymond P. Martinez**  
Chairman and Chief Administrator

July 22, 2013

Re: Patient Medical Certification and Recertification Applications for  
Disability Parking Privileges (*New Jersey State Law, N.J.S.A. 39:4-204 through 39:4-207.9*)

Dear Member of the New Jersey Medical Community:

Effective August 1, 2013, New Jersey State Law regarding the issuance of parking privileges for persons with a disability has been amended to help reduce fraud. The medical certification required to obtain these parking privileges will now expire every three (3) years. Qualified medical practitioners like yourself will play a vital role in helping people who need these privileges to keep them.

As in the past, a patient seeking to initially obtain a persons with a disability placard and/or license plates will continue to ask for your assistance.

One change under the amended law (specifically, N.J.S.A. 39:4-205) is that patients who seek to retain a persons with a disability placard and/or license plates must submit, to the MVC, a new medical certification every three years. This certification can only be obtained from a qualified medical practitioner such as yourself.

The certification that you will be asked to sign, states that the applicant's disability meets, or continues to meet, the eligibility criteria that you are asked to specifically select on the application.

In addition, it is imperative that a clearly written **prescription** from you for the placard/license plates be included **with the certifying application**. Only in the event that you, the medical practitioner, are not authorized to write prescriptions, will a signed, formal letter on your official letterhead, addressed to the MVC, be an acceptable

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substitute for the prescription.

With the implementation of the amended law (N.J.S.A. 39:4-205), no application can be accepted without **both** the signed certification and a prescription (see above for substitution circumstance).

Your patient's application **will be rejected without both** of these necessary components. Your National Provider Identifier (NPI) and taxonomy code (classification of health care providers according to the primary services you render that you specified when applying for your NPI) must also be supplied on the medical certification.

We'd like you to know that your patients can find the updated application form, that they need to fill out and present to you, online at [www.njmvc.gov](http://www.njmvc.gov). This form must be **fully completed** and submitted for all applications, both initial and recertification, for disability parking privileges.

Also effective August 1, 2013, the types of licensed medical practitioners who are qualified to authorize these certifications has been expanded to include all of the following:


- Physicians
- Podiatrists
- Chiropractic physicians
- Physician assistants
- Nurse practitioners

The practitioner must be licensed to practice in the State of New Jersey or a bordering state. Certifications from physicians stationed at a United States military or naval installation located in this state and licensed to practice in any state are also acceptable.

Should you require additional information please feel free to contact:  
(888) 486-3339

As always, your continued cooperation is greatly appreciated.

Sincerely,



Raymond P. Martinez  
MVC Chairman and Chief Administrator

STATE OF NEW JERSEY

License Plate No: \_\_\_\_\_ Placard No: \_\_\_\_\_ Date Issued: \_\_\_\_\_ Employee's Initials: \_\_\_\_\_

(FOR COMMISSION USE ONLY: DO NOT WRITE ABOVE THIS LINE)

**APPLICATION FOR VEHICLE LICENSE PLATES AND/OR PLACARD FOR  
PERSONS WITH A DISABILITY**

THIS IS MY:  INITIAL APPLICATION  RECERTIFICATION APPLICATION  REPLACEMENT APPLICATION

I AM APPLYING FOR:  LICENSE PLATES  PLACARD  BOTH

**SECTION A: PERSON WITH A DISABILITY IDENTIFICATION CARD INFORMATION**

Name of Person with a Disability: \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ Expires \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Sex: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Ht: \_\_\_\_\_ Wt: \_\_\_\_\_

I acknowledge that I hold a Commercial Driver License (CDL) and that this application may result in a medical review which could result in a decision that may affect my New Jersey CDL privilege.

Current Plate Number: \_\_\_\_\_ Current Placard Number: \_\_\_\_\_ (for recertification applications)

**SECTION B: WHEELCHAIR SYMBOL LICENSE PLATES (photocopy of registration required)**

Registered Vehicle Owner's Name \_\_\_\_\_ Vehicle Plate No. \_\_\_\_\_ Expires \_\_\_\_\_

Registered Vehicle Owner's Driver License Number \_\_\_\_\_ Expires \_\_\_\_\_

Street Address \_\_\_\_\_ City, State, Zip Code \_\_\_\_\_

Relationship to the Disabled Applicant:  Spouse  Parent  Guardian  Self  Other (Please Specify) \_\_\_\_\_

**SECTION C: REPLACEMENT PLATES, PLACARD AND/OR IDENTIFICATION CARD**

LICENSE PLATES  PLACARD  IDENTIFICATION CARD

Vehicle Plate Number \_\_\_\_\_ Expires \_\_\_\_\_ Placard Number \_\_\_\_\_ Expires \_\_\_\_\_

Check one:  Lost- attach notarized statement of loss.  
 Damaged - return (plate(s), placard and/or ID card).  
 Stolen - plate(s), placard - attach police report.

**SECTION D: CERTIFICATION OF STATEMENTS**

I CERTIFY, UNDER PENALTY OF LAW, THAT THE STATEMENTS ON THIS APPLICATION ARE TRUE.

Signature of Registered Vehicle Owner: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Person with a Disability: \_\_\_\_\_ Date: \_\_\_\_\_

**SECTION E - MEDICAL PRACTITIONER'S CERTIFICATION & SECTION F - TERMS AND CONDITIONS**

(on page 2)

**MUST BE COMPLETED FOR PROCESSING**  
**APPLICATION FOR VEHICLE LICENSE PLATES AND/OR PLACARDS**  
**FOR PERSONS WITH A DISABILITY**

**SECTION E: MEDICAL PRACTITIONER'S CERTIFICATION**

Name of Medical Practitioner: \_\_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_ Telephone number: \_\_\_\_\_  
National Provider Identification Number (NPI #): \_\_\_\_\_ (required)  
Taxonomy Code: \_\_\_\_\_ (required)

- Required prescription attached.**       **Required letterhead attached (ONLY for medical practitioners who are not authorized to write prescriptions).**

By law, eligibility for license plates and/or a placard for persons with a disability is limited to the following conditions.  
(NO OTHER PERSON IS ELIGIBLE FOR LICENSE PLATES AND/OR A PLACARD).

**Patient Name (print)** \_\_\_\_\_

1. Has lost the use of one or more limbs as a consequence of paralysis, amputation, or other permanent disability.
2. Is severely and permanently disabled and cannot walk without the use of or assistance from a brace, cane, crutch, another person, prosthetic device, wheelchair or other assistive device.
3. Suffers from lung disease to such an extent that the applicant's forced (respiratory) expiratory volume for one second, when measured by spirometry, is less than one liter, or the arterial oxygen tension is less than sixty mm/hg on room air at rest; **or** uses portable oxygen.
4. Has a cardiac condition to the extent that the applicant's functional limitations are classified in severity as Class III or Class IV according to standards set by the American Heart Association.
5. Is severely and permanently limited in the ability to walk because of an arthritic, neurological, or orthopedic condition; **or** cannot walk two hundred feet without stopping to rest.
6. Has a permanent sight impairment of both eyes as certified by the N.J. Commission of the Blind (Placard only).

**I CERTIFY, UNDER PENALTY OF LAW, THAT MY PATIENT (print name)** \_\_\_\_\_  
**HAS BEEN PERSONALLY EXAMINED BY ME AND MEETS THE ELIGIBILITY CRITERIA AS SPECIFIED IN ITEM**  
**NUMBER(S)** \_\_\_\_\_ **(select from above) AND THUS MEETS THE REQUIREMENTS FOR THE RECEIPT OF**  
**LICENSE PLATES AND/OR A PLACARD FOR PERSONS WITH A DISABILITY.**

**Signature of Medical Practitioner** \_\_\_\_\_ **Date** \_\_\_\_\_

**SECTION F: TERMS AND CONDITIONS**

1. Pursuant to N.J.S.A. 2C:21-4(a), N.J.S.A. 2C:43-3, and N.J.S.A. 2C:43-6, making a false statement or providing misinformation on an application to obtain or facilitate the receipt of license plates or placards for persons with disabilities is a fourth degree crime and a person who has been convicted of this offense may be subject to pay a fine not to exceed \$10,000 and a term of imprisonment of up to 18 months.
2. Wheelchair symbol license plates may be issued for one vehicle owned, operated or leased by a person with a disability or family member providing transportation for that person.
3. Wheelchair symbol license plates must be renewed every year, disability recertification is required every **three** years.
4. The placard must be displayed on the rearview mirror of the vehicle whenever such vehicle is parked in a designated wheelchair symbol parking space and must be removed when the vehicle is in motion.
5. Persons with a Disability Identification Cards and placards must be recertified every **three** years.
6. The Motor Vehicle Commission requires that the disability of a person with a disability be recertified by a qualified medical practitioner certifying their qualification as provided under N.J.A.C. 13:20-9.1(a) 4.
7. The Person with a Disability placard and /or license plates are to be used exclusively for a person with a disability named on the identification card. The identification card is nontransferable and shall be revoked if used by any other person. If the placard and/or license plates are no longer used by the person named on the identification card, they must be returned to the New Jersey Motor Vehicle Commission. Abuse of this privilege is cause for revocation of both the license plates and/or placard.

**I CERTIFY, UNDER PENALTY OF LAW, THAT I AGREE WITH THE TERMS AND CONDITIONS OF THIS APPLICATION.**

**Signature of Registered Vehicle Owner:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Person with a Disability:** \_\_\_\_\_ **Date:** \_\_\_\_\_

the aid of an assisting device or whose mobility is otherwise limited as listed on the application and certified by a medical practitioner, or has a condition that otherwise falls under one of the six (6) categories listed on the application, is eligible for wheelchair symbol license plates and/or a placard for special parking privileges.

**SECTION B: WHEELCHAIR SYMBOL LICENSE PLATES**

- A LEGIBLE COPY OF THE CURRENT, VALID VEHICLE REGISTRATION MUST BE ATTACHED TO THE APPLICATION.**
- THE RELATIONSHIP OF VEHICLE OWNER TO THE PERSON WITH A DISABILITY MUST BE CLEARLY INDICATED (BOX MUST BE CHECKED).**
- THE VEHICLE MUST NOT BE REGISTERED TO A BUSINESS/COMPANY, ORGANIZATION OR GROUP.**

LICENSE PLATES: Wheelchair symbol license plates may be issued to only one motor vehicle owned, operated, or leased by a person with a disability or owned by a family member who provides transportation for that person. The vehicle can only park in designated wheelchair symbol parking spaces when the individual designated on the identification card is either driving or a passenger in the vehicle. There is no additional charge for the wheelchair symbol license plates beyond the normal cost for regular plates. Wheelchair symbol license plates cannot be issued for vehicles owned by, or leased to, companies, organizations or groups. Be certain that you enclose a photocopy of the current (valid) vehicle registration with your application. Failure to submit a legible copy will cause delays in receiving your plates.

**SECTION C: REPLACEMENT PLATES, PLACARD AND/OR IDENTIFICATION CARD**

- PROVIDE THE VEHICLE PLATE NUMBER AND/OR PLACARD NUMBER.**
- CLEARLY INDICATE LOST, DAMAGED OR STOLEN (BOX MUST BE CHECKED).**
- PROVIDE A NOTARIZED STATEMENT AND/OR A COPY OF THE POLICE REPORT (WHICHEVER IS APPLICABLE).**
- RETURN THE DAMAGED OR REMAINING ITEMS (WHICHEVER IS APPLICABLE).**

If you cannot go to an MVC Agency, mail your original “Person with a Disability Identification Card” and either the damaged placard or plate, police report, or notarized statement attesting to the loss or theft of the placard/plate to:

Motor Vehicle Commission  
Special Plate Unit  
PO Box 015  
Trenton, NJ 08666-0015

REPLACEMENT IDENTIFICATION CARD: You can go into any MVC Agency to acquire an ID replacement card. Bring your placard and/or vehicle registration with you. There is no fee for a replacement Person with a Disability Identification Card. Remember, it is important to always have a current identification card in your possession if you wish to utilize designated wheelchair symbol parking spaces using either a placard or plates.

REPLACEMENT PLACARD: Damaged, stolen, or lost placards may be replaced by visiting any MVC Agency. If your placard is damaged, bring the damaged placard and your original “Person with a Disability Identification Card.” If your placard is lost, bring your original “Person with a Disability Identification Card.” If your placard was stolen, bring your original “Person with a Disability Identification Card” and a copy of your police report. There is no fee for a replacement placard. If both the Person with a Disability Identification Card and placard are lost or stolen, but not yet expired, it may be possible to reissue a new placard and identification card, if you have a driver license or other form of identification and a notarized statement or police report attesting to the loss or theft of the identification card and placard.

REPLACEMENT PLATES: Damaged, stolen, or lost wheelchair symbol plates may be replaced by visiting any MVC agency. A notarized statement from the vehicle owner, if not the person with a disability, is required to obtain replacement plates. In addition, the person with a disability must bring the original “Person with a Disability Identification Card.” If one or both plates were stolen, a police report is also required. If one plate is lost or stolen, the remaining plate must be surrendered at the MVC agency. If one or both plates are damaged, both plates must be surrendered.

**SECTION D: CERTIFICATION OF STATEMENTS**

- THE REGISTERED VEHICLE OWNER MUST SIGN AND DATE THE APPLICATION FOR WHEELCHAIR SYMBOL LICENSE PLATES FOR IT TO BE PROCESSED.**
- THE PERSON WITH A DISABILITY MUST SIGN AND DATE THE APPLICATION FOR IT TO BE PROCESSED.**

It is important for you to know that pursuant to N.J.S.A. 2C:21-4(a), N.J.S.A. 2C:43-3, and N.J.S.A. 2C:43-6, making a false statement or providing misinformation on an application to obtain or facilitate the receipt of license plates or placards for persons with disabilities is a fourth degree crime and a person who has been convicted of this offense may be subject to pay a fine not to exceed \$10,000 and a term of imprisonment of up to 18 months.

#### **SECTION E: MEDICAL PRACTITIONER'S CERTIFICATION**

- THE APPROPRIATE ITEM NUMBER (1-6) INDICATING THE QUALIFYING DISABILITY MUST BE WRITTEN IN.**
- THE REQUIRED PRESCRIPTION OR THE REQUIRED LETTER MUST BE ATTACHED (ORIGINALS ONLY, NO PHOTOCOPIES WILL BE ACCEPTED).**
- MEDICAL PRACTITIONER MUST SIGN AND DATE THE APPLICATION (DATE MUST BE WITHIN 60 DAYS OF SUBMITTING THE APPLICATION).**
- ALL MEDICAL PRACTITIONER INFORMATION MUST BE PROVIDED AND LEGIBLE (NPI NUMBER AND TAXONOMY CODE ARE REQUIRED).**

A medical practitioner's certification is required as part of the initial and recertification application process. The Motor Vehicle Commission requires your medical practitioner to certify that you meet the eligibility criteria for the Person with a Disability identification card, placard and/or license plates. This certification requires a prescription from the medical practitioner for your condition. If your medical practitioner is not authorized to write prescriptions they are required to write a letter containing the same information that would appear on a script for your condition. The medical practitioner certification requires the disclosure of that practitioner's National Provider Identification Number and their Taxonomy code. Certifications can only be authorized by the following medical practitioners: a physician, podiatrist, chiropractic physician, physician assistant or nurse practitioner licensed to practice in this state or a bordering state or a physician stationed at a military or naval installation located in this State who is licensed to practice in any state.

#### **SECTION F: TERMS AND CONDITIONS**

- READ STATEMENTS 1 THRU 7 ON THE APPLICATION AND UNDERSTAND THAT PURSUANT TO N.J.S.A. 2C:21-4(A), N.J.S.A. 2C:43-3, AND N.J.S.A. 2C:43-6, MAKING A FALSE STATEMENT OR PROVIDING MISINFORMATION ON AN APPLICATION TO OBTAIN OR FACILITATE THE RECEIPT OF LICENSE PLATES OR PLACARDS FOR PERSONS WITH DISABILITIES IS A FOURTH DEGREE CRIME AND A PERSON WHO HAS BEEN CONVICTED OF THIS OFFENSE MAY BE SUBJECT TO PAY A FINE NOT TO EXCEED \$10,000 AND A TERM OF IMPRISONMENT OF UP TO 18 MONTHS.**
- THE MEDICAL PRACTITIONER'S CERTIFICATION MUST BE DATED WITHIN 60 DAYS OF THE APPLICATION SUBMISSION.**
- THE REGISTERED VEHICLE OWNER MUST SIGN AND DATE THE APPLICATION FOR WHEELCHAIR SYMBOL LICENSE PLATES FOR IT TO BE PROCESSED.**
- THE PERSON WITH A DISABILITY MUST SIGN AND DATE THE APPLICATION FOR IT TO BE PROCESSED.**

#### **FREQUENTLY ASKED QUESTIONS**

**My spouse (or other qualified disabled individual) cannot complete the application and/or is unable travel to an Agency to file an application. Can someone else complete and deliver the application for them?**

Yes, the application can be completed by another individual *but the form must be signed by the applicant. (If the applicant cannot sign the form, a Power of Attorney must be included with the application package).* A third party may bring the application to any local MVC agency for same day processing as long as the individual has proper identification and a notarized statement from the person with a disability giving them permission to act on his/her behalf.

**I have more than one vehicle that I drive. Can I get two sets of plates or two placards?**

No. You may have one set of plates or one placard or both depending on your individual needs. This provision of the regulation is based on the fact that the placard can be used in any vehicle in which you are the driver/passenger as long as you have your "Person with a Disability Identification Card" with you.

**If I mail in my application, how long must I wait for my placard/plates to arrive?**

Generally, MVC requires 4-6 weeks to issue plates and placards. Additional time should be allowed for mailing. A checklist is provided with the application form and instructions to help ensure that the form is completed accurately. Using the checklist will help avoid delays in processing.