



**ALTERNATIVE FUEL VEHICLE  
PARKING DECAL APPLICATION**  
Fee: \$10

| FOR COUNTY USE ONLY |      |                  |               |
|---------------------|------|------------------|---------------|
| OLD DECAL NUMBER    |      | NEW DECAL NUMBER |               |
| OFFICE              | DATE | ID#              | TECH INITIALS |

An Alternative Fuel parking decal is issued to qualified alternative fuel vehicles for the purpose of parking.

|   |   |                       |                                      |
|---|---|-----------------------|--------------------------------------|
| VEHICLE LICENSE NUMBER  | VEHICLE IDENTIFICATION NUMBER             | MAKE                  | OLD DECAL NUMBER (if being replaced) |
| <b>SECTION A</b><br><br>PRINTED<br>NAME(S) OF<br>REGISTERED<br>OWNER OF<br>RECORD | TRUE FULL NAME (LAST, FIRST, MIDDLE)      |                       | DRIVER LICENSE OR ID NUMBER          |
|   | TRUE FULL NAME (LAST, FIRST, MIDDLE)      |                       | DRIVER LICENSE OR ID NUMBER          |
|   | RESIDENCE OR BUSINESS ADDRESS             | APT/SPACE NUMBER CITY | STATE ZIP CODE                       |
|   | MAILING ADDRESS (IF DIFFERENT FROM ABOVE) | APT/SPACE NUMBER CITY | STATE ZIP CODE                       |

|   |   |   |   |
|---|---|---|---|
| <b>SECTION B</b><br><br>ALTERNATIVE<br>FUEL VEHICLE<br>DECAL<br>REQUEST | <b>Check appropriate box(es) in each category</b>   |   |   |
|   | I am requesting the following decal:<br><input type="checkbox"/> <b>Original (\$10)</b><br><br><b>Replacement:</b><br><input type="checkbox"/> Lost/Stolen (\$10)<br><input type="checkbox"/> Destroyed or Mutilated (\$10)<br><input type="checkbox"/> Not received (No fee) | As specified on DMV records, the motive power is:<br><input type="checkbox"/> Hybrid (Plug-in)<br><input type="checkbox"/> Electric<br><input type="checkbox"/> Propane<br><input type="checkbox"/> Natural Gas<br><input type="checkbox"/> Other | Type Vehicle:<br><input type="checkbox"/> Auto/Commercial<br><input type="checkbox"/> Other (Specify)<br>_____<br>_____ |

|   |   |   |
|---|---|---|
| <b>SECTION C</b><br><br>MAILING<br>INSTRUCTIONS | <b>Mail the following:</b><br>✓ Completed application<br>✓ Check or money order payable to Clark County | <b>Mail to:</b><br>Clark County<br>Department of Real Property Management<br>500 S. Grand Central Parkway, 4th Floor<br>Las Vegas, NV 89155 |
|   | Please allow three weeks processing and mail time.  |   |

|                                       |  |                                 |
|---------------------------------------|--|---------------------------------|
| <b>SECTION D</b><br><br>CERTIFICATION | The registered owner mailing address is valid, existing, and an accurate mailing address. I consent to receive service of process at this mailing address pursuant to Vehicle Code Section 1808.21, Code of Civil Procedure Sections 415.20, subdivision (b), 415.30, subdivision (a), and 416.90. <b>I certify under penalty of perjury under the laws of the State of Nevada that the foregoing is true and correct.</b> |                                 |
|                                       | This document is executed in Clark County, Nevada, on _____ DATE   |                                 |
|                                       | PRINTED NAME   | DAYTIME TELEPHONE NUMBER<br>( ) |
|                                       | SIGNATURE OF REGISTERED OWNER<br><b>X</b>  | DATE                            |

Upon receipt, place the decal on the lower corner of the rear window (passenger's side). Retain the new registration card and decal receipt for identification purposes.