

VEHICLE SERVICES DIVISION



ORDER REQUEST FOR FORMS

NAME OF COUNTY OR BUSINESS: _____

SHIP TO (STREET ADDRESS): _____

(CITY, STATE, ZIP): _____

PHONE NUMBER: _____ CONTACT NAME: _____

FORM NUMBER	DESCRIPTION OF REQUESTED ITEM	BALANCE ON HAND	QUANTITY REQUESTED

IMPORTANT NOTES:

- RV FORM NUMBERS **MUST BE** USED IN FORM NUMBER FIELD
- PLEASE ALLOW TWO (2) WEEKS FOR ORDER PROCESSING
- WHEN PLACING AN ORDER, PLEASE MAKE FULL USE OF THE SPACE PROVIDED TO AVOID SENDING MULTIPLE ORDER REQUEST FORMS, WHICH MAY DELAY THE PROCESSING OF YOUR ORDER.
- PLEASE PROVIDE BALANCE ON HAND INFORMATION. ORDERS RECEIVED WITHOUT INFORMATION WILL NOT BE PROCESSED

PLEASE SUBMIT ORDERS BY:

EMAIL: dg_plate&supply.team@tn.gov OR
FAX: 615-253-5587