

**WEST VIRGINIA
STATE POLICE**

**EXCHANGE FOR OFFICIAL
INSPECTION STICKERS**



DATE _____

**MAIL TO: West Virginia State Police
Traffic Records Section
701 Jefferson Road
So. Charleston, WV 25309**

(Station Number)

(Signature of Authorized Person)

(Name of Official Station)

(Mailing Address)

(City) (Zip Code)

Phone # _____

Motor Vehicle Stickers Quantity: _____ _____ THIS LINE FOR DEPARTMENT USE ONLY
Motorcycle/Trailer Stickers Quantity: _____ _____ THIS LINE FOR DEPARTMENT USE ONLY
Modified Vehicle Stickers Quantity: _____ _____ THIS LINE FOR DEPARTMENT USE ONLY
CHECKED BY: _____ DATE: _____ DATE STICKERS MAILED: _____

EXCHANGE ONLY

**ALLOW THIRTY (30) DAYS FROM THE DATE OF RECEIPT FOR DELIVERIES.
A MAXIMUM OF 100 STICKERS MAY BE EXCHANGED PER STATION**

EXCHANGE PERIOD IS FROM FEBRUARY 1st THROUGH APRIL 31st

NOTE: Unless the Name and Address above is correct the Department will not be responsible for delivery of stickers. Use exact name and address as it appears on Station License.

