CADILLAC FINANCIAL

gm FINANCIAL

PERSONAL PLATE LETTER REQUEST

Fill out the form below completely.

Date: ___ / ___ / ___

Cadillac Financial Account Number: _____

Name(s) on Account: _____

Mailing Street Address: _____

City, State, ZIP Code: _____

Phone Number: _____

☐   I am requesting a plate **Transfer** letter.

☐   I am requesting a plate **Release** letter.

Return form to: **Name** Personal Plate Department
Fax Number 1-800-342-9605
Email gmfpersplate@pdpgroupinc.com

_____

Signature   Date