

**MARYLAND  
FORM  
010-1**

**ORDER FOR ADDITIONAL  
VEHICLE IDENTIFICATION  
CARDS BY HOLDER OF A  
PUBLIC TRANSPORTATION;  
PUBLIC STORAGE &  
TRANSPORTATION;  
OR INDIVIDUAL  
TRANSPORTATION PERMIT**

Office Use Only	
Number	_____
VID	_____ YR _____
Date	_____
Issued	_____
Approved	_____
Date	_____
Approved	_____
Date	_____

**(DO NOT MAKE ORIGINAL APPLICATION FOR PERMIT ON THIS FORM)**

**Section 1**

A) Permit Number: **PT** \_\_\_\_\_ **ST** \_\_\_\_\_ **IT** \_\_\_\_\_

B) Name as it appears on your permit: \_\_\_\_\_  
\_\_\_\_\_

C) Address: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
City Zip code County State

D) Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

**Section 2 (FEE OF \$10.00 PER IDENTIFICATION MUST ACCOMPANY THIS ORDER)**

Number of ADDITIONAL vehicles requiring identification:

Total Vehicles: \_\_\_\_\_ **Total Fee Enclosed: \$** \_\_\_\_\_

**Section 3**

\_\_\_\_\_  
Signed Title Date

**Mail This Form with Remittance To:**  
**Maryland Alcohol, Tobacco, And  
Cannabis Commission**  
Regulatory & Research Section  
1215 E Fort Avenue, Ste 300  
Baltimore, Maryland 21230

**For more information, contact:**  
**Maryland Alcohol, Tobacco, And  
Cannabis Commission**  
Regulatory & Research Section  
1215 E Fort Avenue, Ste 300  
Baltimore, Maryland 21230

**410-260-7314**  
**atcc.licensing@maryland.gov**  
**atcc.maryland.gov**