MV-511M (2-25)

Pennsylvania
Department of Transportation

ON-LINE MESSENGER ORDER FORM

(The space above is for Department use only)
Bureau of Motor Vehicles • 1101 S. Front Street • Harrisburg, PA 17104

1. List quantity for each secured paper item needed. All orders MUST list a valid Site Number. Please assess your secured paper needs carefully. Over ordering results in increased costs to the commonwealth.
2. Print or type name and address to which secured paper are to be mailed in the space provided. Be certain that the address is clear and complete.
3. Pick-up orders should be Faxed to the Miscellaneous Processing Unit at (717) 241-9769, 24 hours prior to the requested pick-up. If the request is for secured paper to be shipped, please mail this form to Bureau of Motor Vehicles, 1101 S. Front St., Harrisburg, PA 17104 along with the shipping and handling fee information.

Messenger Name: _____ Site #: _____

Address: _____ Telephone Number: _____

Date Ordered: _____ Ordered By: _____ Mailing Date: _____

Signature: _____

Secured Paper Name	Package Size	Quantity
SA-2C - Registration Card/Camera Paper	Pack (200) **2 Pack Limit**	
SA-10 - Watermark Paper/Seals	Pack (250) **2 Pack Limit**	
DL-800C - Update Card Paper (pinfed)	Pack (250) **2 Pack Limit**	
MV-169 - On-Line Messenger Routing Sheets	Pack (250) **1 Pack Limit**	
MV-127 - Bud Sheet	Pack (250) **2 Pack Limit**	
DL-800 - Update Card Paper (cut sheet)	Pack (250) **2 Pack Limit**	

SHIPPING AND HANDLING FEE INFORMATION

Shipping and handling fees are required. Fees are calculated per pack of forms ordered and mailed. If the order will be carried through and picked up by a messenger service, no shipping and handling fee is due.

Up to 2 total packs ordered = $ 5
3 to 4 total packs ordered = $10
5 or more total packs ordered = $15

Please be sure to include the shipping and handling fee with your request. If no fee is included, your request will not be filled.

Total Packs Ordered: _____

Amt. of Check Enclosed: $ _____

Packaged by: _____ Date: _____

Received by: _____ Date: _____
Signature

Received by: _____ Date: _____
Printed Name

DEPARTMENT USE ONLY

BOX	BEGINNING SEQUENCE	BOX	ENDING SEQUENCE

Visit us at www.pa.gov/dmv or call us at 717-412-5300.TYY callers - please dial 711 to reach us.