



APPLICATION FOR TITLE OR REGISTRATION

DMV USE ONLY	
O/S DL #/STATE	
TECH INITIALS	

VEHICLE/HULL IDENTIFICATION NUMBER	MAKE OF VEHICLE OR VESSEL BUILDER
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1. OWNER INFORMATION (Please print true full name or lessor/business name)

LAST NAME OR LESSOR OR BUSINESS NAME <input type="checkbox"/> AND <input type="checkbox"/> OR	FIRST NAME	MIDDLE NAME	CALIFORNIA DRIVER LICENSE OR ID NUMBER	
LAST NAME, OR LESSEE <input type="checkbox"/> AND <input type="checkbox"/> OR	FIRST NAME	MIDDLE NAME	CALIFORNIA DRIVER LICENSE OR ID NUMBER	
LAST NAME, OR LESSEE	FIRST NAME	MIDDLE NAME	CALIFORNIA DRIVER LICENSE OR ID NUMBER	
RESIDENCE OR BUSINESS ADDRESS (Include St., Ave., etc.)	APT./SPACE NO.	CITY	STATE	ZIP CODE
MAILING ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE
LESSEE ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE
TRAILER COACH ONLY – ADDRESS WHERE TRAILER IS LOCATED (If Different From Above)		CITY	STATE	ZIP CODE

2. TITLE HOLDER INFORMATION (Do NOT reenter owner's name) If "NONE," so print

NAME OF BANK/FINANCE COMPANY OR INDIVIDUAL	ELECTRONIC TITLE NUMBER			
BUSINESS OR RESIDENCE ADDRESS	APT./SPACE NO.	CITY	STATE	ZIP CODE
MAILING ADDRESS (If Different From Above)	APT./SPACE NO.	CITY	STATE	ZIP CODE

3. COST AND OPERATION INFORMATION (Purchase price does not include sales tax, insurance, finance charges, or warranty.)

MILES/KILOMETERS: If new owner, enter miles at date of purchase and check here.....
 If no change of ownership, enter miles as of this date and check here.....

DATE VEHICLE ENTERED OR WAS FIRST OPERATED IN CALIFORNIA Mo. _____ Day _____ Yr. _____	DATE YOU WENT TO WORK IN CALIFORNIA OR BECAME A RESIDENT (WHICHEVER OCCURRED FIRST) Mo. _____ Day _____ Yr. _____
VEHICLE WAS PURCHASED OR ACQUIRED ON: Mo. _____ Day _____ Yr. _____	AND WAS (CHECK ONE BOX): <input type="checkbox"/> New <input type="checkbox"/> Used
YEAR MODEL	VEHICLE WAS PURCHASED OR ACQUIRED FROM: <input type="checkbox"/> Dealer <input type="checkbox"/> Family Member <input type="checkbox"/> Private Party

MUST CHECK **ONE** BOX ONLY, AND ENTER REQUIRED INFORMATION FOR **THAT ONE** BOX:

I purchased this vehicle for the price of \$ _____.

I acquired this vehicle as a **gift or trade**. Its value **when I acquired it** was \$ _____.

I acquired this vehicle as a **gift or trade**. Its **current** market value is \$ _____. (Requires completed Statement of Facts [REG 256].)

A. Will this vehicle be used to carry people for hire (taxi, bus, etc.)? Yes No

B. When you acquired this vehicle were you on active duty in the U.S. Armed Forces?..... Yes No
 If yes, print name of state or country where stationed: _____

C. Is this a commercial motor vehicle that operates at 10,001 lbs. or more (pickups excluded)?..... Yes No
 If yes, a Declaration of Gross Vehicle Weight/Combined Gross Vehicle Weight Form (REG 4008) must be completed.
 If yes, a Motor Carrier Permit may be required. Call (916) 657-8153 for further information.

D. Was sales tax paid to another state? Yes No If yes, enter amount paid: \$ _____
 If your car was last registered in another state, you may be eligible for a use tax exemption. For further information please contact the Board of Equalization or visit www.boe.ca.gov.

4. OWNER(S) SIGNATURE(S)

The registered owner mailing address is valid, existing, and an accurate mailing address. I consent to receive service of process at this mailing address pursuant to VC §1808.21.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

OWNER'S SIGNATURE X	DATE	DAYTIME TELEPHONE NUMBER ()
OWNER'S SIGNATURE X	DATE	DAYTIME TELEPHONE NUMBER ()



VERIFICATION OF VEHICLE NOT TO BE COMPLETED BY APPLICANT

This form must be completed in full by an authorized DMV representative, California licensed vehicle verifier, authorized auto club, or peace officer who has been properly trained to perform vehicle verifications.

WARNING: This form must be complete and legible to be acceptable to the DMV. Alterations or erasures will void this form. Your vehicle may also be subject to verification by the California Highway Patrol.

LICENSE PLATES ON VEHICLE	LICENSE PLATE NUMBER	STATE	EXP. DATE
<input type="checkbox"/> None <input type="checkbox"/> Dealer <input type="checkbox"/> Temporary Permit			
VEHICLE IDENTIFICATION NUMBER (VIN)			

ENGINE NUMBER (MOTORCYCLES ONLY)	MAKE	BODY TYPE	MODEL YEAR
_____	_____	_____	_____
AXLES	MOTIVE POWER (FUEL)	EST. WEIGHT (TRAILERS)	MODEL OR SERIES
_____	_____	_____	_____
			NUMBER OF WHEELS

		FOR CMP/CCH/MTRHM	
		Length _____ Width _____	

VIN Location:		Attached by:	
<input type="checkbox"/> Visible through windshield	<input type="checkbox"/> Trunk	<input type="checkbox"/> Not visible	<input type="checkbox"/> Adhesive
<input type="checkbox"/> Body—Left (driver side)	<input type="checkbox"/> Frame	<input type="checkbox"/> Rosette rivets	<input type="checkbox"/> Not applicable
<input type="checkbox"/> Body—Right	<input type="checkbox"/> In the glove box	<input type="checkbox"/> Round rivets	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Engine compartment	<input type="checkbox"/> Other: _____	<input type="checkbox"/> Screws	

Type:		<input type="checkbox"/> Stamped on Frame
<input type="checkbox"/> Metal plate	<input type="checkbox"/> Stamped on body	<input type="checkbox"/> Label
		<input type="checkbox"/> Other: _____

VIN/ENGINE NUMBER (IF MOTORCYCLE, MARK BOTH VIN AND ENG. BOXES)			
VIN	ENG	VIN	ENG
<input type="checkbox"/> <input type="checkbox"/> Appears okay	<input type="checkbox"/> <input type="checkbox"/> Illegible/Damaged	<input type="checkbox"/> <input type="checkbox"/> Cannot locate	<input type="checkbox"/> <input type="checkbox"/> Assigned by F/O
<input type="checkbox"/> <input type="checkbox"/> Altered/Tampered	<input type="checkbox"/> <input type="checkbox"/> Missing	<input type="checkbox"/> <input type="checkbox"/> None—Newly built	<input type="checkbox"/> <input type="checkbox"/> See REMARKS

US FEDERAL CERTIFICATION LABEL STATUS:		US FEDERAL CERTIFICATION LABEL (1970 AND SUBSEQUENT YEAR MODELS):	
<input type="checkbox"/> Agrees with VIN	<input type="checkbox"/> Missing	<input type="checkbox"/> Vehicle complies with US Federal Motor Vehicle Safety Standards (US FMVSS)	
<input type="checkbox"/> Disagrees with VIN	<input type="checkbox"/> None—NA	<input type="checkbox"/> Label indicates name of vehicle importer (enter name of importer in "REMARKS" below)	
<input type="checkbox"/> Illegible/Damaged	<input type="checkbox"/> See REMARKS	<input type="checkbox"/> Vehicle complies with safety requirements of a country other than US	

ODOMETER MILEAGE READING	
record mileage exactly as shown on vehicle odometer	
_____	_____
	<input type="checkbox"/> miles <input type="checkbox"/> 5-digit odometer <input type="checkbox"/> kilometers <input type="checkbox"/> 6-digit odometer <input type="checkbox"/> digital display

SUPPORTING DOCUMENTS:		
<input type="checkbox"/> Agrees with VIN	<input type="checkbox"/> No VIN on documents	<input type="checkbox"/> See REMARKS
<input type="checkbox"/> Disagrees with VIN	<input type="checkbox"/> None	

EMISSION LABEL INDICATES:	
<input type="checkbox"/> Vehicle meets US EPA standards only	<input type="checkbox"/> Vehicle meets California standards only
<input type="checkbox"/> Vehicle meets US EPA standards and California standards	<input type="checkbox"/> Vehicle meets California standards for off highway vehicles
<input type="checkbox"/> Engine displacement less than 50 cubic centimeters	<input type="checkbox"/> None
<input type="checkbox"/> See REMARKS	

REMARKS

DO NOT PROCESS - REFER TO CHP

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that I examined the vehicle described above and I find the description of the vehicle to be as indicated.

VERIFIER (PLEASE PRINT)	TITLE/BADGE/ID NUMBER
_____	_____

ADDRESS	CITY	STATE
_____	_____	_____

VERIFIED AT	CITY	STATE
<input type="checkbox"/> Above address <input type="checkbox"/> Other (specify)	_____	_____

VERIFIER'S SIGNATURE (STAMPED NAMES/SIGNATURES WILL NOT BE ACCEPTED)	EXECUTED AT	CITY	STATE	DATE
_____	_____	_____	_____	_____

X	VERIFYING AGENCY	DAYTIME TELEPHONE NUMBER
<input type="checkbox"/> DMV	<input type="checkbox"/> Vehicle Verifier	<input type="checkbox"/> Auto Club
<input type="checkbox"/> Peace Officer (specify):	_____	

STATEMENT OF FACTS — IDENTIFICATION NUMBER OR ENGINE NUMBER ERROR

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that I am the owner of above described vehicle and had no knowledge of the difference in the identification or engine number on the vehicle and titling documents.

VEHICLE OWNER'S SIGNATURE	DATE
X	_____