



ACCOUNT #: []

VEHICLE UNIT # (OEN) []

A) VEHICLE IDENTIFICATION NUMBER B) YEAR C) MAKE D) VEHICLE TYPE E) FUEL/CYL F) WHEELBASE

G) UNLADEN WT H) SEATS I) AXLES J) COMBINED AXLES K) COLOR L) OWNER NAME

M) TITLE DOC. # N) TITLE DOC. JUR. O) SAFETY TAXPAYER ID # (TIN) P) SAFETY US DOT #

Q) Will vehicle safety responsibility change during the year? R) SAFETY NAME

S) MAXIMUM DESIRED WEIGHT T) PURCHASE PRICE U) PURCHASE DATE V) FACTORY PRICE

W) INS. CO. CODE X) CURRENT PLATE # Y) CURRENT PLATE CLASS Z) SPECIAL USE

REGISTRATION AUTHORIZATION IF THE REGISTRANT IS NOT THE OWNER, fill in the information below. Proof of ownership and proof of the OWNER'S name and date of birth are required.

Owner's Name Date of Birth Is the vehicle leased? Address Apt. No. City State Zip Code

The person named in number 3 of Part 1 is authorized to register this vehicle in his/her name. Owner's Authorized Signature X Date: If signing for a corporation, print your full name and title here

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**VEHICLE INFORMATION FOR
NEW ACCOUNTS, ADDITIONS, OR CHANGES**

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Owner's Authorized Signature X _____			Date: _____			
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