

# Vehicle Registration Form

**Buyers:** Fill out the top half of this form completely.

Enter the information exactly as you want it to appear on the title/registration.

First / Middle / Last Name: \_\_\_\_\_  
\*Enter company name if registering to an organization

Physical Street Address: \_\_\_\_\_ Apt# \_\_\_\_\_ PO Box: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ County: \_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Driver's License #: \_\_\_\_\_ (copy of DL required)

\*Ins. Company: \_\_\_\_\_ Policy #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
\*Required for motorized vehicles

Is a secured party involved in the purchase of this vehicle?  YES  NO

If yes, provide the secured party. Name: \_\_\_\_\_

Address: \_\_\_\_\_

What is the color of the vehicle? \_\_\_\_\_ Collector Class - Current plate # \_\_\_\_\_  
\*Required for change to Collector class

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**BIDDER** – Please advise affiliate if any changes are needed during title transfer. (i.e. GVW, Class, etc.)

\*Please note, changes can result in additional fees due for transfer

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**Affiliate**, note change here: \_\_\_\_\_

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**If the vehicle weight is 10,000 lbs or more**, provide the information for the applicable GVW.

## **GVW 10,000 to 15,000 lbs**

Is the vehicle being registered to an individual for non-commercial use?  YES (stop here)  NO

If the vehicle is being registered to a company, DOT# required: \_\_\_\_\_ # of axles: \_\_\_\_\_

## **GVW over 15,000 lbs**

The vehicle will be registered for commercial use, DOT# required: \_\_\_\_\_ # of axles: \_\_\_\_\_

## **GVW over 55,000 lbs**

DOT# required: \_\_\_\_\_ # of axles: \_\_\_\_\_

Heavy Vehicle Use Tax Form **MUST** be submitted to transfer ownership.

## **Farm Class ONLY**

Is the vehicle being changed to Farm class?  YES  NO

Is the Farm vehicle being registered yearly/quarterly?  Year  Qtr Qtr #'s to register: \_\_\_\_\_

(Qtr 1 – May; Qtr 2 – Aug; Qtr 3 – Nov; Qtr 4 – Feb)