5	New York State of OPPORTUNITY. Department of Motor Vehicles VEHICLE REGISTRATION/TITLE APPLICATION Batch File No. Office Use Only Class													
IN														
	s this vehicle being registered only for personal use? Yes No													
	If YES - Complete sections 1-4 of this form.													
	Note: If this vehicle is a pick-up truck with an unladen weight that is a maximum of 6,000 pounds, is never used for commercial purposes and does not have advertising on any part of the truck, you are eligible for passenger plates or commercial plates. Select one: Dassenger Plates Commercial Plates													
	If NO - Complete sections 1-5 of this form.													
	B. Complete the Certification in Section 6.													
	C. Refer to form MV-82.1 Registering/Titling a Vehicle in New York State for information to complete this form.													
	I WANT TO: REGISTER A VEHICLE RENEW A REGISTRATION GET A TITLE ONLY Current Plate Number													
	CHANGE A REGISTRATION REPLACE LOST OR DAMAGED ITEMS TRANSFER PLATES													
	NAME OF PRIMARY REGISTRANT (Last, First, Middle or Business Name) FORMER NAME (If name was changed you must present proof)													
	Name Change Yes D No D													
	NYS driver license ID number of PRIMARY REGISTRANT DATE OF BIRTH GENDER TELEPHONE or MOBILE PHONE NUMBER													
	Month Day Year Area Code													
Ň	NAME OF CO-REGISTRANT (Last, First, Middle)													
SECTION	Name Change Yes □ No □													
SEC	NYS driver license ID number of CO-REGISTRANT DATE OF BIRTH GENDER													
	Month Day Year ADDRESS CHANGE? YES NO													
	THE ADDRESS WHERE PRIMARY REGISTRANT GETS MAIL (Include Street Number and Name, Rural Delivery or box number. This address will be on the document.) Apt. No. City or Town State Zip Code County of Residence													
	THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS. (DO NOT GIVE A P.O. BOX.)													
	Apt. No. City or Town State Zip Code													
	Apt. No. City or Town State Zip Code													
_	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one)													
_	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Image: State Image:													
-	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Year Make 2-Door Convertible Trailer Type of Power (Fuel) 4-Door Suburban/SUV Motorcycle Pick-up Limo Tow													
2	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Vehiculation Image: State													
ON 2	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER Body Type (mark one) Ender the state Type of Power (Fuel) Color Unladen Weight Type of Power (Fuel) Electric File CNG Propane None For trailers & commercial vehicles Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles													
CTION 2	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Verification of the state Image: State													
	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER Body Type (mark one) Ender the state Type of Power (Fuel) Color Unladen Weight Type of Power (Fuel) Electric File CNG Propane None For trailers & commercial vehicles Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles													
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ECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER Vehicle DESCRIPTION Body Type (mark one) Image: State													
ECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one)													
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ECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Verification Year Make 2-Door Convertible Trailer Color Unladen Weight Gas Diesel Electric Fix CNG Propane None Van Other Tow Cylinders Maximum Gross Weight Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Cylinders Maximum Gross Weight Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, Islance No If If YES, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb)? Yes No No IMPORTANT: If your vehicle was altered/stretched to increase the passenger capacity, you must present to the DMV office a photograph or copy of all labels or plates (normally put on the driver's side door). If the vehicle was altered or stretched and now has an adult seating capacity of 11 or more (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter.													
3 SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Year Make 2-Door Convertible Trailer Color Unladen Weight Gas Diesel Electric Flex CNG Propane None Office Use Only For commercial vehicles Cylinders Maximum Gross Weight Adult Seating Capacity (including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Cylinders Maximum Gross Weight Adult Seating Capacity (including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, Image Driver) No If YES, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb)? Yes No No IMPORTANT: If your vehicle was altered/stretched to increase the passenger capacity, you must present to the DMV office a photograph or copy of all labels or plates (normally put on the driver's side door). If the vehicle was altered or stretched and now has an adult seating capacity of 11 or more (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter. PRIMARY OWNER													
3 SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Verification Year Make 2-Door Convertible Trailer Color Unladen Weight Gas Diesel Electric Fix CNG Propane None Van Other Tow Cylinders Maximum Gross Weight Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Cylinders Maximum Gross Weight Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only For commercial vehicles Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, Islance No If If YES, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb)? Yes No No IMPORTANT: If your vehicle was altered/stretched to increase the passenger capacity, you must present to the DMV office a photograph or copy of all labels or plates (normally put on the driver's side door). If the vehicle was altered or stretched and now has an adult seating capacity of 11 or more (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter.													
3 SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) 2-Door Convertible Trailer 6olor Unladen Weight 2-Door Convertible Trailer 6olor Unladen Weight Gas Diesei Electric Flex CNG Propane None Office Use Only For commarcial vehicles Cylinders For trailers & commercial vehicles [Adult Seating Capacity (Including Driver)] Odometer Reading in Miles Office Use Only Axles Distance Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, Yes No If Iff YES, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb)? Yes No No IMPORTANT: If your vehicle was altered/stretched to increase the passenger capacity, you must present to the DMV office a photograph or copy of all labels or plates (normally put on the driver's side door). If we vehicle was altered or stretched and now has an adult seating capacity of 11 or more (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter. PRIMARY OWNER NYS License Number NAME OF PRIMARY OWNER (Last, First, Middle) PRIMARY													
SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one)													
3 SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Verification Verification Verification Body Type (mark one) Verification Verification Body Type (mark one) Trailer Verification Verification Body Type (mark one) Trailer Verification Verification Body Type (mark one) Trailer Verification Verification State Procentation Body Type (mark one) Color Unitaden Weight Gas Diseol Electric Flox CNG Propane None Procentation Tow Cylinders Maximum Gross Weight Adult Seating Capacity (Including Driver) Odometer Reading in Miles Office Use Only Milese Brand Acles Distance Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, Perimeter No If Ingeneration Information For cammercial vehicles No If Yes No No If YES, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb)?													
3 SECTION	Apt. No. City or Town State Zip Code VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one)													

New Plate		1		1		New Class				Ins. Co. Code				Special Con			<u> </u>	50	FV		
Sales Tax	Status	Value (\$)	·	Ra	ite	Out of \$	State			Jurisdictior	1		Audit		BV D N	CF IE I	CO NF 1	EO IR I	EX NU	FL OP	ov
Prior Owner					Issuance State	Title	Lien	1	Lien Number				Lien Release	PA SI	PI PS	PK R S	RC SS S	RE SV -	SC TE	SO TL	то
Proof Submitted TP_TR_TX_XR_X6_WO																					
Reg/Title State Stop/Resp								/Respon	ise/Sco	ff Law				Approved B	У				Dat	е	

SECTION 4	DAMAGE DISCLOSURE Has the vehicle been wrecked, destroyed, or damage and labor to rebuild or reconstruct the vehicle to the to operate on the road or highways, is more than 75% If you marked YES, the vehicle must have an anti-th have the statement "Rebuilt Salvage" on it. VEHICLE MODIFICATIONS Has this vehicle been modified from the original mart the wheel base? (Examples include: color changes, vehicles.) If "Yes," describe the modifications:	condition it was in before an a % of the retail value of the vehi- neft examination before it is reg nufacturer specifications withou	accident, and to make the vehicle legal cle at the time of loss? gistered. The title that is issued will ut extending the chassis or lengthening □ Yes	□ No							
	NON-PERSONAL VEHICLE USE * Vehicles that transport passengers may require NYS D NYS DOT Inspection (see https://www.dot.ny.gov/ (see https://dmv.ny.gov/motor-carriers/information- Check one:	divisions/operating/osss/bus/in	ps://www.dot.ny.gov/divisions/operating/osss/bus/passe nspection) and/or be subject to Article 19-A requirer								
	A commercial tow truck with a gross vehicle weight rating of at least 8,600 pounds	Ambulette*	Operates as a taxi* (you <u>must</u> complete the "Taxis Only" section below)								
	Used only as a farm vehicle (form MV-260F, Part 1 <u>must</u> be submitted)	Hearse	Rented without a driver (private rental)								
	Used only as an agricultural truck or agricultural trailer	 Combination Hearse/Invalid Coach* Used to transport passengers (Bus, Livery, School Bus, School Car) 	Used to pick up passengers for compen- only in jurisdictions that do not regulate tax	sation ‹is*							
N N											
	INSURANCE REQUIREMENTS										
	INSURANCE REQUIREMENTS For Hire (direct or indirect compensation) - Submit an FH Certificate DOT Operation - Submit and record the NYS DOT Permit and/or the Federal DOT Permit number:										
	Not For Hire - Submit a current and valid NYS Insurance ID Card										
	TAXIS ONLY (check one)										
			Vehicle is used for pick up in a jurisdiction	that							
	 Vehicle is used in New York City, Westchester, or Nassau counties. Vehicle is used as a contract carrier in NYC (commuter van with seating capacity between 9 and 14). You are eligible for LIVERY plates. Vehicle is used for pick up in a jurisdiction that regulates taxis other than NYC, Westchester county, or Nassau county. 										
	CERTIFICATION I certify that the information I have given on this application and on any documentation provided in support of this application is true and complete. I certify that the vehicle is fully equipped as required by the Vehicle and Traffic Law, and has passed the required New York State inspection, or has qualified for a time extension (form VS-1077) and will be inspected within 10 days. I also certify that appropriate insurance coverage is in effect, and that the vehicle will be operated in accordance with the Vehicle and Traffic Law. If I am applying for replacement registration items, I certify that the registration is not currently under suspension or revocation. If I have plates in a series reserved for a special group, I certify that I am still eligible to receive them, and that I have only one set of these plates. If I am using a credit card for payment of any fees in connection with this application, I understand that my signature below also authorizes use of my credit card. WARNING: Intentionally making a false statement or providing false or misleading information in connection with this application is a criminal offense that may subject you to prosecution under the law.										
0	Print Name Here	onal Here									
	(Print Name in Full - if registering for a corporation, print your full name and title) (Print Name in Full)										
	Sign Here X (Sign Here)	Additio Signa	(Sign Here - Additional signature required for a partnership or								
			if registering this vehicle in more than one name.)								

PAYMENT INSTRUCTIONS

You can pay for your transaction by check, money order or credit card.

- 1. Select your payment method.
- 2. Complete the section for your payment method.
- 3. Make your check or money order payable to the "Commissioner of Motor Vehicles" (DO NOT SEND CASH)
- 4. Return page 3 with your application. Make sure to include your check or money order if applicable.

Check	Money Orde	er Amount Er	nclosed \$			
Credit Card Aut	horization - Prov	vide all of the informa	tion below.			
Credit Card Type	Visa	☐ MasterCard		rican Express	Discover	
Name (as it appears	on credit card)					
Credit Card Number				Expiration Date	Security Code (3 or 4 digit co	de on back or front of your card)
Authorized Signature X						