



Department of Motor Vehicles

VEHICLE REGISTRATION/TITLE APPLICATION FOR DEALER SALES

This form is available at dmv.ny.gov

Office Use Only section with fields for Batch File No., Orig, Activity, Renewal, Lease Buyout, Dup, Activity W/RR, Renew W/RR, Sales Tax with Title, and Class.

I WANT TO: REGISTER A VEHICLE, RENEW A REGISTRATION, GET A TITLE ONLY, CHANGE A REGISTRATION, REPLACE LOST OR DAMAGED ITEMS, TRANSFER PLATES. Includes Plate Number field.

Section 1: NAME OF PRIMARY REGISTRANT, REGISTRANT TYPE, NYS driver license ID number, DATE OF BIRTH, SEX, NAME OF CO-REGISTRANT, ADDRESS CHANGE, FORMER NAME, EMAIL, THE ADDRESS WHERE PRIMARY REGISTRANT GETS MAIL, THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS.

Section 2: VEHICLE IDENTIFICATION NUMBER, VEHICLE DESCRIPTION, Body Type, Color 1, Color 2, Unladen Weight, Type of Power (Fuel), Office Use Only Mileage Brand, Axles, Distance, CHANGES: Describe any vehicle changes and the reasons for the changes.

Section 3: If the OWNER of the vehicle is DIFFERENT from the REGISTRANT, the OWNER must complete this section. NYS driver license number of OWNER, NAME OF CURRENT OWNER(s), DATE OF BIRTH, NAME OF CO-OWNER, THE ADDRESS WHERE OWNER GETS MAIL, Signature of owner or authorized person, and signature of co-owner if applicable.

DEALER USE ONLY - LIEN FILING - Alterations are not allowed in the lienholder section below. Choose one: There are no liens, I am filing for the lienholder(s) listed below. Includes Lien Filing Code, Lienholder Name, Lienholder Mailing Address.

NEW YORK DEALERS ONLY. Did you issue plates to this vehicle? Plate Number, Reg. Class, Date Temp Issued, Facility ID Number.

DEALER CERTIFICATION: I certify that all information provided on this application is true. I take responsibility for the integrity of the papers delivered to the Motor Vehicles office. (Signature of Dealer or Authorized Representative)

OFFICE USE ONLY. New Plate, Sales Tax, Status, Value, Rate, New Class, Out of State, Ins. Co. Code, Jurisdiction, Audit, Prior Owner, Issuance State, Title, Lien, Lien Number, Lien Release, Proof Submitted, Reg/Title, State, Stop/Response/Scoff Law, Approved By, Date.

4 ADDITIONAL VEHICLE INFORMATION → **QUESTIONS 1-4 MUST BE COMPLETED.**

1. Has the vehicle been wrecked, destroyed, or damaged to such an extent that the total estimate, or actual cost, of parts and labor to rebuild or reconstruct the vehicle to the condition it was in before an accident, and to make the vehicle legal to operate on the road or highways, is more than 75% of the retail value of the vehicle at the time of loss?

No Yes - (If you marked **Yes** the vehicle must have an anti-theft examination before it is registered. The title that is issued will have the statement "Rebuilt Salvage" on it.)

2. Is this vehicle registered for your personal use? Yes No

If you marked "Yes", go to the next question (question 3). If you marked "No", check any of these boxes that apply:

This vehicle is a passenger vehicle that will be used for hire with a driver and will be operated in the following location(s):

New York City (NYC) A jurisdiction that is not NYC that regulates taxis A jurisdiction that does not regulate taxis

This vehicle is used as a contracted carrier.

This vehicle is a passenger vehicle that is rented without a driver.

This vehicle requires a permit for **commercial operation**. (Mark the box of the type of permit that was issued and write the permit number on the line.) NYS DOT Permit No. _____ Federal DOT Permit No. _____

The **government owns** this vehicle.

This vehicle is used as (mark one) **an ambulance** **an ambulette** **a hearse or invalid coach**
If payment is received to carry passengers, mark this box.

This vehicle is used exclusively as a **hearse**. If payment is received to carry passengers, mark this box.

This vehicle is a **commercial tow truck** with a gross vehicle weight rating of at least 8,600 pounds.

This vehicle is used only as a **farm vehicle**. (form MV-260F, Part 1, must be attached)

This vehicle is used only as an **agricultural truck or agricultural trailer**.

This vehicle is subject to the Department of Transportation inspection requirements for the carriers that transport passengers. (For more information, refer to form MV-82.1P, "Inspection Requirements for Carriers Transporting Passengers".)

3. Has this vehicle been modified from the original manufacturer specifications? Yes No If "Yes", describe the modifications:

4. Was this vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, lengthened wheel base, or a lengthened seating area? Yes No

If **YES**, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb) in accordance with VTL §401? Yes No

If **YES**, is this altered vehicle equipped with safety belts at all occupant seating positions? Yes No

* If your vehicle was altered or stretched to increase the passenger capacity, you must present to the DMV issuing 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 9 or more adults (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter.

5. If this vehicle is a **pick-up truck** that 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. I want (mark one): Passenger Plates Commercial Plates

5 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.

Print Name Here →

(Print Name in Full - if registering for a corporation, print your full name and title)

Sign Here →

(Sign Here)

Print Additional Name Here →

(Print Name in Full)

Additional Signature Sign Here →

(Sign Here - Additional signature required for a partnership or if registering this vehicle in more than one name.)