

DEPARTMENT USE ONLY – DO NOT WRITE IN SHADED AREAS				490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES										
OLD #1	#2	<input type="checkbox"/> IN LIEU PLATE	<input type="checkbox"/> TEMP PLATE DATE				/										
NEW #1	TITLE CODE			<input type="checkbox"/> 225	<input type="checkbox"/> 227	<input type="checkbox"/> 231	<input type="checkbox"/> 232	<input type="checkbox"/> 233	<input type="checkbox"/> 452								
				<input type="checkbox"/> 453	<input type="checkbox"/> 454	<input type="checkbox"/> 455	<input type="checkbox"/> 465	<input type="checkbox"/> LP	<input type="checkbox"/> 2 Year								
1A TRANSACTION TYPE		1B PLATE TYPE															
<input type="checkbox"/> (421) NEW REGISTRATION <input type="checkbox"/> (431) TRANSFER PLATE NO. <input type="checkbox"/> (475) RENEW PLATE NO. <input type="checkbox"/> IRP TAX & TITLE ONLY <input type="checkbox"/> WEIGHT CHANGE ONLY		<input type="checkbox"/> SCHOOL BUS (19) <input type="checkbox"/> VFW (52) <input type="checkbox"/> ATV (02) <input type="checkbox"/> MUNICIPAL (15) <input type="checkbox"/> PLEASURE CAR (19) <input type="checkbox"/> CONSERVATION PLATE (48, 57) <input type="checkbox"/> US VET (49) <input type="checkbox"/> EMS (46) <input type="checkbox"/> FREEMASONS (54) <input type="checkbox"/> VANITY <input type="checkbox"/> BUILDING BRIGHT FUTURES (55) <input type="checkbox"/> NATIONAL GUARD (41) <input type="checkbox"/> VOLUNTEER (28) <input type="checkbox"/> ROTARY (53) <input type="checkbox"/> DISABLED PLATE <input type="checkbox"/> OFF-HWY TRACTOR (24) <input type="checkbox"/> PURPLE HEART (47) <input type="checkbox"/> FIREFIGHTER (40) <input type="checkbox"/> MOTOR BUS (04, 05) <input type="checkbox"/> TRUCK (27) <input type="checkbox"/> AGRICULTURE (01) FARM USE ONLY <input type="checkbox"/> POW (23) <input type="checkbox"/> JITNEY/RENTAL (37) <input type="checkbox"/> AMERICAN LEGION (38) <input type="checkbox"/> TRAILER (26, 25, 06) <input type="checkbox"/> SPECIAL PURPOSE TRK CAT I (11) <input type="checkbox"/> US VET (49) <input type="checkbox"/> ANTIQUE (03) (AN) <input type="checkbox"/> STATE (22) <input type="checkbox"/> MOTORCYCLE (18) <input type="checkbox"/> SPECIAL PURPOSE TRK CAT II (20) <input type="checkbox"/> VIETNAM VET (50) <input type="checkbox"/> EXHIBITION (09) (EX) <input type="checkbox"/> STREET ROD (56) <input type="checkbox"/> MOTOR HOME (19) <input type="checkbox"/> AMATEUR RADIO OPR (42) <input type="checkbox"/> FARM TRACTOR (45) <input type="checkbox"/> LIONS CLUB (51) <input type="checkbox"/> MOPED (17)															
2		MAKE (a)	MODEL (b)	MODEL YEAR (c)	BODY TYPE (d)	MILEAGE (NO TENTHS) (e)	<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS	COLOR (f)									
SERIAL NUMBER (VIN) (g)				NO OF CYL (h)	VEHICLE IS (i)		(j)										
				<input type="checkbox"/> NEW	<input type="checkbox"/> USED	<input type="checkbox"/> REBUILT	<input type="checkbox"/> GAS	<input type="checkbox"/> DIESEL	<input type="checkbox"/> HYBRID	<input type="checkbox"/> ELECTRIC	<input type="checkbox"/> PROPANE	<input type="checkbox"/> OTHER					
3A TRUCKS <small>includes Pick-Up & AGRICULTURE VEHICLES</small>			3B TRAILERS			3C MOTORCYCLE <small>ATV/Moped</small>		3D BUS/JITNEY/RENTAL									
EMPTY WEIGHT (a)		LOADED WEIGHT (b)		EMPTY WEIGHT (a)		WEIGHT OF TRAILER & LOAD (c)		# Wheels (a)		EMPTY WEIGHT (a)							
# OF AXLES (c)		BRAKE TYPE (e) <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER		LENGTH x WIDTH (FT) (b)		<input type="checkbox"/> 1499 lbs or less (26) <input type="checkbox"/> 1500 lbs or more (25)		CC's (b)		# OF PASSENGERS (b)							
						<input type="checkbox"/> Pedals? <input type="checkbox"/> YES <input type="checkbox"/> NO				LOADED WEIGHT (c)							
4A		<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE	VT DRIVER LICENSE NO (j)	SSN or FEDERAL ID NUMBER (fg)	GENDER (c) <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> CO-OWNER <input type="checkbox"/> LESSOR	VT DRIVER LICENSE NO (t)	SSN or FEDERAL ID NUMBER (pg)	GENDER (m) <input type="checkbox"/> M <input type="checkbox"/> F								
Name (b)					Name (l)												
Mailing Address (PO Box or Street) (d):					Mailing Address (PO Box or Street) (n):												
City:			State:	ZIP:	City:			State:	ZIP:								
Physical Address (Street) (e):					Physical Address (Street) (o):												
City:			State:	ZIP:	City:			State:	ZIP:								
DATE OF BIRTH (h):		IF NAME HAS CHANGED, LIST PREVIOUS NAME (i);			DATE OF BIRTH (r):		IF NAME HAS CHANGED, LIST PREVIOUS NAME (s);										
4B IF MORE THAN ONE OWNER MUST INDICATE RIGHTS OF SURVIVORSHIP (CHECK ONE BELOW) IF NO BOX IS CHECKED "JOINT TENTANTS" WILL BE SELECTED																	
<input type="checkbox"/> HUSBAND & WIFE OR PARTIES TO A CIVIL UNION <input type="checkbox"/> JOINT TENTANTS <input type="checkbox"/> TENANTS IN COMMON <input type="checkbox"/> PARTNERS (business)																	
5A		NAME OF LIENHOLDER (a)			DATE OF BIRTH (f) (if individual)			5B		NAME OF PERSON/COMPANY VEHICLE ACQUIRED FROM (a)			DATE PURCHASED (b)				
MAILING ADDRESS - STREET, CITY, STATE, ZIP CODE (b)					IF NO LOAN, CHECK BOX <input type="checkbox"/>		ADDRESS OF PERSON/COMPANY VEHICLE ACQUIRED FROM (c)										
DATE OF LOAN (h)		VT LICENSE NO (g)		IS THERE A SECOND LOAN? IF YES, CHECK BOX & SEND DETAILS <input type="checkbox"/>		SIGNATURE OF PERSON/COMPANY (AGENT) VEHICLE ACQUIRED FROM (d)				DEALER NUMBER (e)							
6 TO CLAIM TAX CREDIT, COMPLETE SECTION 6 BELOW						9 DO NOT SEND CASH – DO NOT WRITE IN SHADED AREA											
PURCHASE PRICE (a)		\$		PURCHASER OF OLD VEHICLE (e)				A - Registration		See instructions for fees		1					
TAX CREDIT (b)		\$		CITY		STATE		ON (DATE) (f)		B - Tax		2					
NET TAXABLE COST (c)		\$		YEAR (g)		MAKE (g)		PLATE (h)		TAX EXEMPT # (i)		C - Title - \$28.00 (ATV \$15.00) plus \$7.00 per loan		See instructions for fees		3	
TAX (6%) (d)		\$		VIN (g)								D - Transfer - \$20.00 (ATV \$10.00)		4			
<input type="checkbox"/> Please check here if vehicle was registered/titled out-of-state in your Spouse's or Party to a Civil Union's name only & is now being registered or titled in Your or Party a Civil Union name only, and you were married to each other or were Party to a Civil Union when the tax was paid out-of-state (j)												E - 1 st Class Mail Optional, New plate only		\$2.25		5	
7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION																	
VEHICLE IDENTIFICATION (SERIAL) NUMBER. NO ALTERATIONS OR ERASURES ACCEPTED. (a)						STATE OF REG											
DATE			AT TOWN OR CITY			STATE			Misc			10					
DATE			AT TOWN OR CITY			STATE			Other								
AUTHORIZED SIGNATURE				ORGANIZATION								G - Total Fees					
NCIC <input type="checkbox"/> Y <input type="checkbox"/> N		VINASSIST <input type="checkbox"/> Y <input type="checkbox"/> N		CERTIFICATE NUMBER		PHONE NUMBER		MILEAGE (NO TENTHS)		<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS		Return #		Rater #		RF	
8																	
The owner certifies that this vehicle 1) is properly equipped and in good mechanical condition; 2) was placed into use on or before the date this application was signed; 3) currently has liability insurance in effect as required by 23 V.S.A. §800 (a). If transfer of plates, the owner and/or this vehicle are not under suspension pursuant to 23 V.S.A. §3009 (b) [diesel tax related]. Statements and warrants herein are certified under penalty of 23 V.S.A. §202, §203, §2082, and 32 V.S.A. §§ 8901-8915.						As the applicant for registration of a commercial motor vehicle, which is a motor vehicle with a gross vehicle weight rating of 10,001 lbs. or more; is a vehicle that is used to transport hazardous materials; or is a vehicle that is designed to transport 16 or more passengers, including the driver, I hereby declare that I have knowledge of the Federal Motor Carrier Safety Regulations, Title 49 of the Code of Federal Regulations, as adopted by the State of Vermont.											
SIGNATURE (OWNER/LESSEE) (a)						DATE (b)		SIGNATURE (CO-OWNER/LESSOR)									
Phone Number:						Email Address:											

DEPARTMENT USE ONLY – DO NOT WRITE IN SHADED AREAS				490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES					
OLD #1	#2	<input type="checkbox"/> IN LIEU PLATE	<input type="checkbox"/> TEMP PLATE DATE					/				
NEW #1	TITLE CODE			<input type="checkbox"/> 225	<input type="checkbox"/> 227	<input type="checkbox"/> 231	<input type="checkbox"/> 232	<input type="checkbox"/> 233	<input type="checkbox"/> 452			
				<input type="checkbox"/> 453	<input type="checkbox"/> 454	<input type="checkbox"/> 455	<input type="checkbox"/> 465	<input type="checkbox"/> LP	<input type="checkbox"/> 2 Year			
1A TRANSACTION TYPE		1B PLATE TYPE										
<input type="checkbox"/> (421) NEW REGISTRATION		<input type="checkbox"/> PLEASURE CAR (19)		<input type="checkbox"/> SCHOOL BUS (19)		<input type="checkbox"/> VFW (52)		<input type="checkbox"/> ATV (02)		<input type="checkbox"/> MUNICIPAL (15)		
<input type="checkbox"/> (431) TRANSFER PLATE NO.		<input type="checkbox"/> VANITY		<input type="checkbox"/> CONSERVATION PLATE (48, 57)		<input type="checkbox"/> US VET (49)		<input type="checkbox"/> EMS (46)		<input type="checkbox"/> FREEMASONS (54)		
<input type="checkbox"/> (475) RENEW PLATE NO.		<input type="checkbox"/> DISABLED PLATE		<input type="checkbox"/> BUILDING BRIGHT FUTURES (55)		<input type="checkbox"/> NATIONAL GUARD (41)		<input type="checkbox"/> VOLUNTEER (28)		<input type="checkbox"/> ROTARY (53)		
<input type="checkbox"/> IRP TAX & TITLE ONLY		<input type="checkbox"/> TRUCK (27)		<input type="checkbox"/> OFF-HWY TRACTOR (24)		<input type="checkbox"/> PURPLE HEART (47)		<input type="checkbox"/> FIREFIGHTER (40)		<input type="checkbox"/> MOTOR BUS (04, 05)		
<input type="checkbox"/> WEIGHT CHANGE ONLY		<input type="checkbox"/> TRAILER (26, 25, 06)		<input type="checkbox"/> AGRICULTURE (01) <i>FARM USE ONLY</i>		<input type="checkbox"/> POW (23)		<input type="checkbox"/> JITNEY/RENTAL (37)		<input type="checkbox"/> AMERICAN LEGION		
		<input type="checkbox"/> MOTORCYCLE (18)		<input type="checkbox"/> SPECIAL PURPOSE TRK CAT I (11)		<input type="checkbox"/> US VET (49)		<input type="checkbox"/> ANTIQUE (03) (AN)		<input type="checkbox"/> STATE (22)		
		<input type="checkbox"/> MOTOR HOME (19)		<input type="checkbox"/> SPECIAL PURPOSE TRK CAT II (20)		<input type="checkbox"/> VIETNAM VET (50)		<input type="checkbox"/> EXHIBITION (09) (EX)		<input type="checkbox"/> STREET ROD (56)		
				<input type="checkbox"/> AMATEUR RADIO OPR (42)		<input type="checkbox"/> FARM TRACTOR (45)		<input type="checkbox"/> LIONS CLUB (51)		<input type="checkbox"/> MOPED (17)		
2		MAKE (a)	MODEL (b)	MODEL YEAR (c)	BODY TYPE (d)	MILEAGE (NO TENTHS) (e)	<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS		COLOR (f)			
SERIAL NUMBER (VIN) (g)					NO OF CYL (h)	VEHICLE IS (i)			<input type="checkbox"/> GAS <input type="checkbox"/> DIESEL <input type="checkbox"/> HYBRID (j) <input type="checkbox"/> NEW <input type="checkbox"/> USED <input type="checkbox"/> REBUILT <input type="checkbox"/> ELECTRIC <input type="checkbox"/> PROPANE <input type="checkbox"/> OTHER			
3A TRUCKS <small>includes Pick-Up & AGRICULTURE VEHICLES</small>				3B TRAILERS				3C MOTORCYCLE <small>ATV/Moped</small>		3D BUS/JITNEY/RENTAL		
EMPTY WEIGHT (a)		LOADED WEIGHT (b)		EMPTY WEIGHT (a)		WEIGHT OF TRAILER & LOAD		# Wheels		EMPTY WEIGHT		
# OF AXLES (c)		BRAKE TYPE <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER		LENGTH (FT) x WIDTH (FT)		<input type="checkbox"/> 1499 lbs or less (26) <input type="checkbox"/> 1500 lbs or more (25)		CC's		# OF PASSENGERS (b)		
								Pedals? <input type="checkbox"/> YES <input type="checkbox"/> NO		LOADED WEIGHT (c)		
4A		<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE		GENDER <input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> OWNER <input type="checkbox"/> LESSOR				GENDER <input type="checkbox"/> M <input type="checkbox"/> F		
Name				Name								
Mailing Address (PO Box or Street):				Mailing Address (PO Box or Street):								
City:		State:		ZIP:		City:		State:		ZIP:		
DATE OF BIRTH:		IF NAME HAS CHANGED, LIST PREVIOUS NAME;				DATE OF BIRTH:		IF NAME HAS CHANGED, LIST PREVIOUS NAME;				

Please do not submit an application for transfer of your plates until after your old vehicle has changed ownership, otherwise, the application will be returned to you.

NOTICE OF TRANSFER OF OWNERSHIP – DO NOT COMPLETE UNTIL VEHICLE IS BEING SOLD!
DO NOT GIVE THIS REGISTRATION CERTIFICATE TO PURCHASER OF VEHICLE

Ownership of this vehicle has been transferred by me on _____ to

(NAME OF NEW OWNER)

(ADDRESS OF NEW OWNER)

and I further certify that the plate(s) have been removed from the vehicle described above and will be returned to the Department of Motor Vehicles within 5 days of this notice, or I will return only the certificate and make application for transfer of registration within 24 hours to another unregistered motor vehicle of the same type owned by me.

Signature _____
(MUST AGREE WITH NAME SHOWN IN SECTION 4a)

Complete only after vehicle is sold!

The Department of Motor Vehicles must be notified in writing, within 30 days, of changes in your mailing address, legal name or legal residence. When you receive registration plate(s) and/or sticker(s), verify that the expiration month matches the expiration month on this registration, and that the plate numbers match the plate number on this certificate and on the validation stickers. If these do not match, notify the Department of Motor Vehicles immediately. When transferring your registration, complete the transfer section of this certificate and attach to a completed application for new vehicle registration. All applications will be returned if not completed properly, or if payment is insufficient. If purchase and use tax credit is being requested, credit will be based on the amount actually received from the person whose name appears on the certificate above.

To be considered for a refund of your registration/renewal fees you must return the number plates, if any, the validation stickers, if issued for that year, and the registration certificate, (1) For registrations, which are cancelled prior to the beginning of the registration period, the refund is the full amount of the fee paid, less a fee of \$5.00. The validation stickers may be affixed to the plates. (2) For registrations, which are cancelled within 30 days of the date of issue, the refund is the full amount of the fee paid, less a charge of \$5.00. The owner must prove that the number plates have not been used or attached to a motor vehicle, or that the current validation sticker has not been affixed to the plate. (3) For registrations, which are cancelled prior to the beginning of the second year of a two-year registration period, the refund is one-half of the full amount of the two-year fee paid, less a charge of \$5.00. The validation stickers may be affixed to the plates. For information about refund requests and application forms, call 802.828.2000. Vehicles not displaying a valid Vermont inspection sticker must be inspected within 15 days of registration. You must present a valid insurance card to the inspection station to show proof of insurance or the vehicle cannot be inspected.