NEW YORK STATE OF OPPORTUNITY.	Department o Motor Vehicle
	motor venicle

VEHICLE REGISTRATION/

Office Use Only	Class	
Batch File No.	1 1	
☐ Orig ☐ Activity ☐ Renewal ☐ Lease Buyout	Three of Nan	ne
□ Dup □ Activity W/RR □ Renew W/RR □ Sales Tax with Title		

TITLE APPLICATION FOR **DEALER SALES** This form is available at dmv.ny.gov Plate Number I WANT TO: REGISTER A VEHICLE **RENEW A REGISTRATION** GET A TITLE ONLY **CHANGE A REGISTRATION** REPLACE LOST OR DAMAGED ITEMS TRANSFER PLATES Registrant Type NAME OF PRIMARY REGISTRANT (Last, First, Middle or Business Name) ☐ Individual ☐ Co-Registrants ☐ Corp/Organization NYS driver license ID number of PRIMARY REGISTRANT DATE OF BIRTH GENDER Year Male \square Female NAME OF CO-REGISTRANT (Last, First, Middle) NYS driver license ID number of CO-REGISTRANT DATE OF BIRTH **GENDER** □ No ID# Year Day Male \square Female Π MOBILE TELEPHONE NUMBER TELEPHONE NUMBER Area Code Area Code NAME CHANGE? ☐ YES ☐ NO ADDRESS CHANGE? ☐ YES FORMER NAME (If name was changed you must present proof)) **EMAIL** 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 Zip Code County of Residence State THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS. (DO NOT GIVE A P.O. BOX.) Zip Code City or Town 2 VEHICLE IDENTIFICATION NUMBER VEHICLE DESCRIPTION Body Type (mark one) Year ☐ 2-Door ☐ 4-Door ☐ Pick-up ☐ Van Type of Power (Fuel) ☐ Convertible ☐ Suburban/SUV ☐ Trailer Color 1 Color 2 Unladen Weight Gas Diesel Delectric Delec None ☐ Motorcycle ☐ Tow ☐ Other For commercial vehicles For trailers & commercial vehicles (Including driver) Office Use Only Cylinders Maximum Gross Weight **Adult Seating Capacity** Odometer Reading in Miles Mileage Brand Distance Ε CHANGES: Describe any vehicle changes and the reasons for the changes. (SUBMIT NYS TITLE IF ISSUED) 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) (Last, First, Middle) DATE OF BIRTH □ No ID# NAME OF CO-OWNER → **GENDER** Male ☐ Female ☐ THE ADDRESS WHERE OWNER GETS MAIL (Include the Street Number and Name, Rural Delivery or box number) County Apt. No. City or Town State Zip Code (Signature of owner or authorized person, and signature of co-owner if applicable) (Date) DEALER USE ONLY - LIEN FILING - Alterations are not allowed in the lienholder section below Choose $\underline{one} \longrightarrow \square$ There are \underline{no} liens \square I am filing for the lienholder(s) listed below Lien Filing Code Lienholder Name Lienholder Mailing Address (number, street, city, state, zip code) **NEW YORK DEALERS ONLY** Did you issue plates to this vehicle? Plate Number Facility ID Number Date Temp Issued ☐ Yes ☐ No **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 New Ins. Co. Special Conditions Class Code Plate BV CF CO EO EX Sales Tax Status Value Rate Out of State Jurisdiction Audit (\$) OP ov Prio Issuance State Lien Release Lien Lien SO Number Owner sv то SR SS TE TL **Proof Submitted** TP TR TX XR X6 wο

ADDITIO	NAL VEHICLE INFORMATION ———— QUESTIONS 1-4 <u>MUST</u> BE COMPLETED.
rebuild	e vehicle been wrecked, destroyed, or damaged to such an extent that the total estimate, or actual cost, of parts and labor to lor reconstruct the vehicle to the condition it was in before an accident, and to make the vehicle legal to operate on the road or ays, is more than 75% of the retail value of the vehicle at the time of loss?
	No Yes - (If you marked <u>Yes</u> 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 If you	vehicle registered for your personal use? Yes No No 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. The government owns this vehicle. This vehicle is used as (mark one) an ambulance an ambulette a hearse or invalid coach of 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".) is vehicle been modified from the original manufacturer specifications? Yes No If "Yes", describe the modifications:
5. Has ti	is verifice been modified from the drightal manufacturer specifications:
wheel	his vehicle altered to increase the capacity beyond that provided by the manufacturer by method of extended chassis, lengthened base, or a lengthened seating area? Yes No
	t, do you have the required Federal Alterer's Safety Certification (normally found on the door jamb) in accordance with 401? Yes No
If YES	, is this altered vehicle equipped with safety belts at all occupant seating positions? 🗌 Yes 🔲 No
of all	or vehicle was altered or stretched to increase the passenger capacity, you must present to the DMV issuing office a photograph or copy 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 nore adults (including the driver), you must show the original NYS DOT Inspection Receipt OR a NYS DOT Exemption Letter.
	ehicle is a pick-up truck with an unladen weight that is a maximum of 6,000 pounds. This vehicle is never used for commercial ses and does not have advertising on any part of it. I want (mark one): Passenger Plates Commercial Plates
application required certify the Law. If I have plates. In authorized	CICATION: I certify that the information I have given on this application and on any documentation provided in support of this on is true and complete. I certify that the vehicle is fully equipped as required by the Vehicle and Traffic Law, and has passed the New York State inspection, or has qualified for a time extension (form VS-1077) and will be inspected within 10 days. I also at appropriate insurance coverage is in effect, and that the vehicle will be operated in accordance with the Vehicle and Traffic am applying for replacement registration items, I certify that the registration is not currently under suspension or revocation. If I tes 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 is use of my credit card for payment of any fees in connection with this application, I understand that my signature below also is use of my credit card.
WARNI	NG: Intentionally making a false statement or providing false or misleading information in connection with this application is a crimina offense that may subject you to prosecution under the law.
Print Nam	
	(Print Name in Full - if registering for a corporation, print your full name and title)
Sig	n Here ♦
	(Sign Here)
Print A	Additional Name Here
	(Print Name in Full)
Additiona	(Sign Hore Additional signature required for a partnership or if registaring this vahiole in more than one name)

MV-82DEAL (2/22) PAGE 2 OF 2