	Department of Motor Vehicles
OPPORTUNITY.	Motor Vehicles

VEHICLE REGISTRATION/TITLE APPLICATION

Batch File No.	Offic	ce Use Only		Class		
Orig Dup	Activity Activity W/RR	Renewal Renew W/RR	Lease Buyout	Three	of N	lam
☐ Sales Ta	ax with Title	☐ Sales Tax Onl	v without Title	١.		

INSTRUCTIONS:

A. Is this vehicle being registered only for personal use? \square Yes \square 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: Passenger Plates Commercial Plates

If ${f NO}$ - Complete sections 1-5 of this form.

		ication in Section 6 2.1 Registering/Titl		de in Ne	ew York	State for	· informa	ation to	comple	te this f	form.					
	I WANT TO:	REGISTER A		ON	Ξ.	V A REGI			ITEMS	一		E ONLY	Cui	rrent Plate Nu	ımber	
	NAME OF PRIMARY	Y REGISTRANT (Lasi	t, First, Midd	le or Bus	iness Na	me)				FOI	RMER N	IAME (If na	me was c	hanged you mus	st present pro	oof)
									e Change	_						
	NYS driver licens	se ID number of PRIM/	ARY REGISTI	RANT [DATE OF	BIRTH		Yes	□ No [GEND∣	FR		TELEI	PHONE or MC	BILE PHO	NE NUMBER
_					Month	Day	Yea	r I		Male		emale 🗆	Area (
	NAME OF CO-REGI	ISTRANT (Last, First,	Middle)								EMAII	<u>L</u>				
SECTION									me Chang Yes □	e No □						
S	NYS driver lice	ense ID number of Co	O-REGISTRA	ANT [DATE OF	BIRTH			163 🗖	GEND	ER					
S					Month	Day	Yea	r		Male		emale 🛘				
										Iviale		emale —	ADI	DRESS CHA	NGE? ∐ \	∕ES □ NO
	THE ADDRESS WHI	ERE PRIMARY REGI	STRANT GE	TS MAIL	_ (Includ	le Street Nu	mber and Apt. No		ural Delive	ry or box	number.	This address State	will be or	the document.) Zip Code		of Residence
							Apt. N	J. Olly	OI TOWII			Otate		Zip Gode	County	or residence
	THE ADDRESS WH	HERE PRIMARY REG	SISTRANT R	ESIDES	IF DIFFI	ERENT FF	ROM THI	MAILI	NG ADD	RESS. ((DO NOT	GIVE A P.O.	BOX.)			
							Apt. No	c. City	or Town			State		Zip Code		
	VEHICLE IDENTIFIC	CATION NUMBER							VEH	ICLE DE	ESCRIP	TION	Body	Type (mark or	ne)	
									Year		Make		11	Door 🗆 Conve		Trailer
			Tvn	e of Pov	ver (Fuel	D								Door 🔲 Subur		Motorcycle
	Color	Jnladen Weight			Diesel	✓ □ Electi		Flex	□ cng	П.		None	l I	ck-up Limo		Tow
				jas L	→ Diesei	L Electi	ric 🗀	Flex	LI CNG	Pro	ppane		☐ Va	_ Other		
N 2		For trailers & commercial t Maximum Gross Weight		Adult Sea	ating Capa	city (Includ	ding Drive	r)	Odon	neter Rea	ding in N		ice Use (eage Bra		Axles	al vehicles Distance
9									┛┖					E DN		
SECTION		altered to increase	•	, ,		•	-			-					Yes □	No 🗆
	If VES do you ha	ave the required Fe	deral Alter	or's Saf	ety Cart	ification	(normal	ly found	d on the	door is	amh)2				Yes □	No 🗆
		•			•		`	•		,	,					
		your vehicle was a (normally put on t														
		ver), you must show											i addit	ocating cap	doity of	T OF THOSE
	If the OWNER of	the vehicle is DIF	FERENT fr	om the	REGIS	TRANT,	the OW	/NER n	nust co	mplete	this s					PRIMARY
PRIMARY OWNER NYS License Number NAME OF PRIMARY OWNER (Last, First, Middle)									Y OWNER F BIRTH		OWNER GENDER					
The state of the s								Month I	Day Year		☐ Male					
3																☐ Female
6	THE ADDRESS WH	ERE PRIMARY OWN	IER GETS N	IAIL (Inc			er and Nan ity or Towr		Delivery or	box numi		State ı	Zip Cod	le	County	
SECTION																
SE	NAME OF													N □ My sig		
	CO-OWNER											in Section on the contract on the contract of		ster this vehicle ment.	e in his/her	name. I have
	Χ															
	(Signature of ALL own	ner(s) and proof of ID re	quired when f	irst apply	ing for a l					ntity for I	Registra	tion and Titl	e.)		(Da	ate)
N				N.		OFF	ICE U	SE ON	LY				0 ""			
New				New Class			Ins. Co. Code						Condition		E0	V E'
Sale	s Tax Status Valu		Э	Out of St	tate		Jurisdicti	on		Au	udit	_ A	IO IO		EO E NR NU	X FL OP OV
Prior			Issuance State	Title	Lien	Lien				Lie	en Releas	se P/		NE NF PK RC	RE S	
Own	er		State			Number							SP		SV TE	TL TO
Proc	of Submitted											Т	P TF			wo
_		_			Stop/Res	sponse/Sco	ff Law					Approve				Date
Reg	/Title	State														

If y have very least the very least	Sign Here X (Sign Here)		Additional Signature					
NO INS INS I CE Veh (for according to the control of a many to the cont	Print Name Here (Print Name in Full - if registering for a corporation, print	nt your full name and title)	Print Additional Name Here					
NO * V N (\$ Ch	CERTIFICATION I certify that the information I have given on this application vehicle is fully equipped as required by the Vehicle and T (form VS-1077) and will be inspected within 10 days. I accordance with the Vehicle and Traffic Law. If I am application. If I have plates in a series reserved for a special amusing a credit card for payment of any fees in connection. WARNING: Intentionally making a false statement or p that may subject you to prosecution under	raffic Law, and has passe also certify that appropri ying for replacement regis cial group, I certify that I an tion with this application, roviding false or mislead	d the required Nevate insurance covertration items, I ceron still eligible to real understand that it	v York State inspection, or has qualified for erage is in effect, and that the vehicle tify that the registration is not currently unceive them, and that I have only one set my signature below also authorizes used	or a time extension will be operated in nder suspension or of these plates. If no fine card.			
If y have have have have have have have have	TAXIS ONLY (check one) Vehicle is used in New York City, Westcheste Vehicle is used as a contract carrier in NYC (co capacity between 9 and 14). You are eligible for	mmuter van with seatir	g	Vehicle is used for pick up in a regulates taxis other than NYC county, or Nassau county.	jurisdiction that , Westchester			
If y have NO NO S Ch	INSURANCE REQUIREMENTS For Hire (direct or indirect compensation) - Sul Not For Hire - Submit a current and valid NYS			DOT Operation - Submit and reco Permit and/or the Federal DOT Pe				
If y have NO NO S Ch	Ambulance	(Bus, Livery, Sc School Car)	hool Bus,	Other - describe the use:				
VE Has the veh	Used only as an agricultural truck or agricultural trailer	Combination He Coach*		Used to pick up passengers only in jurisdictions that do not	for compensatio regulate taxis*			
VE Has the veh	Used only as a farm vehicle (form MV-260F, Part 1 must be submitted)	Rented without a driver (priva	Rented without a driver (private rental)					
VE Has the veh	Check one: A commercial tow truck with a gross vehicle weight rating of at least 8,600 pounds							
VE Has the veh	*Vehicles that transport passengers may require NY NYS DOT Inspection (see https://www.dot.ny.g (see https://dmv.ny.gov/motor-carriers/informatic	ov/divisions/operating/	osss/bus/insped					
If y hav	NON DEDCOMAL VEHICLE LICE							
If y	VEHICLE MODIFICATIONS Has this vehicle been modified from the original r the wheel base? (Examples include: color change vehicles.) If "Yes," describe the modifications:				☐ Yes ☐ No			
	If you marked YES, the vehicle must have an an have the statement "Rebuilt Salvage" on it.	ti-theft examination be	fore it is register	red. The title that is issued will				
Has	DAMAGE DISCLOSURE Has the vehicle been wrecked, destroyed, or dar and labor to rebuild or reconstruct the vehicle to to operate on the road or highways, is more than	the condition it was in 75% of the retail value	before an accide of the vehicle a	ent, and to make the vehicle legal at the time of loss?	☐ Yes ☐ No			

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 Order Amount Enclosed \$								
Credit Card Auth	orization - Prov	ide all of the informa	ation below.					
Credit Card Type	☐ Visa	☐ MasterCard	☐ America	an Express	Discover			
Name (as it appears of	n credit card)							
Credit Card Number			Ex	xpiration Date	Security Code (3 or 4 digit code on back or front of your card)			
Authorized Signature X			'					

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