DMV
A Public Service Agency

APPLICATION FOR TITLE OR REGISTRATION

FOR ACCURACY, PLEASE PRINT LEGIBLY. COMPLETE BOTH SIDES.

SECTION 1 — VEHICLE INFORMATION

VEHICLE IDENTIFICATION NUMBER | VEHICLE MAKE | YEAR MODEL | FUEL TYPE

CALIFORNIA LICENSE NUMBER | MODEL OR SERIES | BODY TYPE MODEL | MOTORCYCLE ENGINE NUMBER

TYPE OF VEHICLE (CHECK ONE BOX)

☐ Auto ☐ Commercial (includes truck & pickup) ☐ Motorcycle ☐ Off Highway ☐ Trailer Coach

FOR TRAILER COACHES ONLY: LENGTH ________ IN. WIDTH ________ IN.

Will this vehicle be used for the transportation of persons for hire, compensation, or profit (e.g. limousine, taxi, bus, etc.)? ☐ Yes ☐ No

Is this a commercial vehicle that operates at 10,001 lbs. or more (or is a pickup exceeding 8,001 lbs. unladen and/or 11,499 lbs. Gross Vehicle Weight Rating (GVWR))? ☐ Yes ☐ No

IMPORTANT: If yes, a Declaration of Gross Vehicle Weight/Combined Gross Vehicle Weight (REG 4008) form must be completed. If yes, a Motor Carrier Permit may be required. Refer to www.dmv.ca.gov for more information.

FOR COMMERCIAL VEHICLES ONLY

Number of axles: ____________ Unladen weight: ____________ ☐ Actual ☐ Estimated (Vehicles over 10,001 lbs. only)

SECTION 2 — OWNER INFORMATION *Each owner must sign on reverse side.*

Once registered, upon transfer of ownership, co-owners joined by "AND" require the signature of each owner; co-owners joined by "OR" require the signature of only one owner.

TRUE FULL NAME OF OWNER (LAST, FIRST, MIDDLE, SUFFIX), BUSINESS NAME, OR LESSOR | DRIVER LICENSE/ID CARD NUMBER | STATE

TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) ☐ AND ☐ OR | DRIVER LICENSE/ID CARD NUMBER | STATE

TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) ☐ AND ☐ OR | DRIVER LICENSE/ID CARD NUMBER | STATE

PHYSICAL RESIDENCE OR BUSINESS ADDRESS | APT./SPACE/STE. NO. | CITY | STATE | ZIP CODE

COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRINCIPALLY GARAGED | EQUIPMENT NUMBER (OPTIONAL)

MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL ADDRESS ABOVE) | APT./SPACE/STE. NO. | CITY | STATE | ZIP CODE

LESSEE ADDRESS (IF DIFFERENT FROM ABOVE) | APT./SPACE/STE. NO. | CITY | STATE | ZIP CODE

TRAILER COACH ONLY - ADDRESS WHERE LOCATED (IF DIFFERENT FROM PHYSICAL ABOVE) | CITY | STATE | ZIP CODE

SECTION 3 — LEGAL OWNER (LIEN HOLDER/TITLE HOLDER) *If None, must write "None"*

Attention ELT Legal Owners: The ELT name and address and ELT number MUST be entered exactly as shown on the ELT listing.

TRUE FULL NAME OF BANK/FINANCE COMPANY OR INDIVIDUAL | ELECTRONIC LIENHOLDER ID NO. ELT

PHYSICAL RESIDENCE OR BUSINESS ADDRESS | APT./SPACE/STE. NO. | CITY | STATE | ZIP CODE

MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL ADDRESS ABOVE) | APT./SPACE/STE. NO. | CITY | STATE | ZIP CODE

SECTION 4 — ODOMETER INFORMATION

The odometer reading: ☐ upon date of purchase in California was ☐ as of this date is (if no change in ownership) [ ][ ][ ] , [ ][ ][ ][ ] (no tenths) miles. If kilometers check this box: ☐

and to the best of my knowledge reflects the ACTUAL mileage unless one of the following statements is checked.

WARNING — ODOMETER DISCREPANCY

☐ Odometer reading is NOT the actual mileage ☐ Mileage EXCEEDS the odometer mechanical limits

Explain odometer discrepancy: ________________________________

REG 343 (REV. 2/2012) WWW