

DO NOT WRITE IN SHADED AREAS DMV Copy TA-VD-119 06/2013	Old #1	IN LIEU PLATE	TEMP PLATE DATE	490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES /
	New #1	New #2	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"/> SCHOOL BUS (19)	<input type="checkbox"/> VFW (52)	<input type="checkbox"/> ATV (02)	<input type="checkbox"/> MUNICIPAL (15)
PLATE # _____ <input type="checkbox"/> NEW (421) <input type="checkbox"/> TRANSFER (431) <input type="checkbox"/> RENEW (475) REPLACEMENT PLATE <input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> SEIZED <input type="checkbox"/> IRP TAX & TITLE <input type="checkbox"/> WEIGHT CHANGE	<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) <i>FARM USE ONLY</i>	<input type="checkbox"/> POW (23)	<input type="checkbox"/> JITNEY/RENTAL (37)	<input type="checkbox"/> STATE (22)
	<input type="checkbox"/> TRAILER (26, 25, 06)	<input type="checkbox"/> SPECIAL PURPOSE TRK CAT I (11)	<input type="checkbox"/> VIETNAM VET (50)	<input type="checkbox"/> ANTIQUE (03) (AN)	<input type="checkbox"/> STREET ROD (56)
	<input type="checkbox"/> MOTORCYCLE (18)	<input type="checkbox"/> SPECIAL PURPOSE TRK CAT II (20)	<input type="checkbox"/> AMERICAN LEGION (38)	<input type="checkbox"/> EXHIBITION (09) (EX)	<input type="checkbox"/> FARM TRACTOR (45)
	<input type="checkbox"/> MOTOR HOME (19)	<input type="checkbox"/> AMATEUR RADIO OPR (42)	<input type="checkbox"/> SHERIFF (43)	<input type="checkbox"/> LIONS CLUB (51)	<input type="checkbox"/> Motor Driven Cycle (17)

2 MAKE	MODEL	MODEL YEAR	BODY TYPE	MILEAGE (NO TENTHS)	<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS	COLOR
SERIAL NUMBER (VIN)			NO OF CYL	VEHICLE IS <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 (including Pick-Up & Farm)	3B TRAILERS	3C MOTORCYCLE ATV/MDC	3D BUS/JITNEY/RENTAL
EMPTY WEIGHT	EMPTY WEIGHT	# Wheels	EMPTY WEIGHT
LOADED WEIGHT	LOADED WEIGHT	CC's	# OF PASSENGERS
# OF AXLES	LENGTH x WIDTH (FT)		LOADED WEIGHT
BRAKE TYPE <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER			

4A <input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE	VT DRIVER LICENSE NO	SSN or FEDERAL ID NUMBER	GENDER <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> CO-OWNER <input type="checkbox"/> LESSOR	VT DRIVER LICENSE NO	SSN or FEDERAL ID NUMBER	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:	
Physical Address (Street)				Physical Address (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		
Phone Number & Email Address:							

4B Spouses Joint Tenants Tenants In Common Partners (business) TOD (Transfer on Death)

5A Date of loan VT license # (if individual) Date of birth (if individual)

5B Name of person/company vehicle acquired from Date purchased

Lienholder Name	Lienholder Address	Address of person/company vehicle acquired from
City	State Zip	Signature of person/company (agent) vehicle acquired from Dealer number

6A Purchase Price	6B Complete Section 6B to Claim Tax Credit or to Transfer Plates	9 DO NOT WRITE IN SHADED AREA
PURCHASE PRICE \$	PURCHASER OF OLD VEHICLE	Registration 1
TAX CREDIT \$	CITY STATE ON (DATE)	Tax 2
NET TAXABLE COST \$	YEAR MAKE PLATE TAX EXEMPT #	Title 3
TAX (6%) \$	VIN	Transfer 4

7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION

VEHICLE IDENTIFICATION NUMBER	STATE OF REG	Warranty Fee \$5.00 12 NEW Vehicles Only
DATE	AT TOWN OR CITY STATE	Fuel User 31
AUTHORIZED SIGNATURE ORGANIZATION		Other

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)	DATE	SIGNATURE (CO-OWNER/LESSOR)
--------------------------	------	-----------------------------

Customer Copy TA-VD-119 06/2013	Old #1	IN LIEU PLATE	TEMP PLATE DATE	490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES /						
	New #1	New #2	Title Code	<input type="checkbox"/> 225 <input type="checkbox"/> 453	<input type="checkbox"/> 227 <input type="checkbox"/> 454	<input type="checkbox"/> 231 <input type="checkbox"/> 455	<input type="checkbox"/> 232 <input type="checkbox"/> 465	<input type="checkbox"/> 233 <input type="checkbox"/> LP	<input type="checkbox"/> 452 <input type="checkbox"/> 2 Year				
1A TRANSACTION TYPE		1B PLATE TYPE		<input type="checkbox"/> SCHOOL BUS (19)		<input type="checkbox"/> VFW (52)		<input type="checkbox"/> ATV (02)		<input type="checkbox"/> MUNICIPAL (15)			
PLATE # _____ <input type="checkbox"/> NEW (421) <input type="checkbox"/> TRANSFER (431) <input type="checkbox"/> RENEW (475) REPLACEMENT PLATE <input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> SEIZED <input type="checkbox"/> IRP TAX & TITLE <input type="checkbox"/> WEIGHT CHANGE		<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) <i>FARM USE ONLY</i>		<input type="checkbox"/> POW (23)		<input type="checkbox"/> JITNEY/RENTAL (37)		<input type="checkbox"/> STATE (22)			
		<input type="checkbox"/> TRAILER (26, 25, 06)		<input type="checkbox"/> SPECIAL PURPOSE TRK CAT I (11)		<input type="checkbox"/> VIETNAM VET (50)		<input type="checkbox"/> ANTIQUE (03) (AN)		<input type="checkbox"/> STREET ROD (56)			
		<input type="checkbox"/> MOTORCYCLE (18)		<input type="checkbox"/> SPECIAL PURPOSE TRK CAT II (20)		<input type="checkbox"/> AMERICAN LEGION (38)		<input type="checkbox"/> EXHIBITION (09) (EX)		<input type="checkbox"/> FARM TRACTOR (45)			
		<input type="checkbox"/> MOTOR HOME (19)		<input type="checkbox"/> AMATEUR RADIO OPR (42)		<input type="checkbox"/> SHERIFF (43)		<input type="checkbox"/> LIONS CLUB (51)		<input type="checkbox"/> Motor Driven Cycle (17)			
2	MAKE	MODEL	MODEL YEAR	BODY TYPE	MILEAGE (NO TENTHS)	<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS	COLOR						
SERIAL NUMBER (VIN)				NO OF CYL	VEHICLE IS <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 (including Pick-Up & Farm)			3B TRAILERS			3C MOTORCYCLE ATV/MDC		3D BUS/JITNEY/RENTAL					
EMPTY WEIGHT		LOADED WEIGHT		EMPTY WEIGHT		LOADED WEIGHT <input type="checkbox"/> 1500 or ↓ (26) <input type="checkbox"/> 1501 or ↑ (25)		# Wheels		CC's			
# OF AXLES		BRAKE TYPE <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER		LENGTH x WIDTH (FT)						EMPTY WEIGHT # OF PASSENGERS LOADED WEIGHT			
4A	<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE	VT DRIVER LICENSE NO	SSN or FEDERAL ID NUMBER	GENDER <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> CO-OWNER <input type="checkbox"/> LESSOR	VT DRIVER LICENSE NO	SSN or FEDERAL ID NUMBER	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:						
Physical Address (Street)				Physical Address (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					
Phone Number & Email Address:													
4B	<input type="checkbox"/> Spouses <input type="checkbox"/> Joint Tenants <input type="checkbox"/> Tenants In Common <input type="checkbox"/> Partners (business) <input type="checkbox"/> TOD (Transfer on Death)												
5A	Date of loan	VT license # (if individual)	Date of birth (if individual)	5B Name of person/company vehicle acquired from				Date purchased					
Lienholder Name			Lienholder Address			Address of person/company vehicle acquired from							
City		State	Zip	Signature of person/company (agent) vehicle acquired from				Dealer number					
6A Purchase Price			6B Complete Section 6B to Claim Tax Credit or to Transfer Plates					9 DO NOT WRITE IN SHADED AREA					
PURCHASE PRICE		\$	PURCHASER OF OLD VEHICLE					Registration		1			
TAX CREDIT		\$	CITY		STATE	ON (DATE)	Tax		2				
NET TAXABLE COST		\$	YEAR	MAKE	PLATE	TAX EXEMPT #	Title		3				
TAX (6%)		\$	VIN				Transfer		4				
7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION							Warranty Fee	\$5.00	12	NEW Vehicles Only			
VEHICLE IDENTIFICATION NUMBER						STATE OF REG	Fuel User		31				
DATE		AT TOWN OR CITY			STATE	Other							
AUTHORIZED SIGNATURE				ORGANIZATION				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 #	Rate #	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)				DATE				SIGNATURE (CO-OWNER/LESSOR)					

1A	TRANSACTION TYPE: (New, Transfer or Renewal) Please indicate if this is a New Registration, Transfer or Renewal.				
New	<ul style="list-style-type: none"> First time registration. New plates issued. May be Vermont or out-of-state vehicle. Complete the entire application. 				
Transfer	<ul style="list-style-type: none"> For transfer of your Vermont registration from one vehicle to another, complete the entire application. Enter the plate number that you are transferring. Fill out section 6B of this application. A change of legal ownership of your previous vehicle must occur before a transfer will be allowed. 				
Renewal	<ul style="list-style-type: none"> For renewal complete Sections 1, 2, 4 and 8. Section 3, if applicable. Enter the plate number you are renewing. 				
Replacement	<ul style="list-style-type: none"> Indicate reason for replacement – Lost, Stolen or Seized by Law Enforcement. \$10.00 for all vehicles excluding state, municipal, fire department, and rescue organizations which are \$7.00 				
IRP	<ul style="list-style-type: none"> Complete this form for Title and Purchase & Use Tax purposes. Special IRP Applications must also be completed. For IRP forms and information call 802-828-2071. These transactions are only processed in the Montpelier office. 				
Weight Change	<ul style="list-style-type: none"> For changing the registered weight on a currently registered vehicle. 				
1B	VEHICLE TYPE: Choose the one that best describes your vehicle registration. Additional Forms Required for the following plates				
POW (23) VFW (52) NAT'L GUARD (41)	EMS (46) VANITY ROTARY (53)	LIONS CLUB (51) <input type="checkbox"/> DISABLED PLATE FIRE FIGHTER (40)	FREE MASONS (54) AMATEUR RADIO OPR (42) US VETERANS (49)	PURPLE HEART(47) PEARL HARBOR (44) VIETNAM VETERANS (50) AMERICAN LEGION (38)	
2	Complete entire section for all types of vehicles				
3A	Complete for Trucks including Pick Up Trucks, Agricultural Vehicles, Cargo Vans, etc.	3B	Complete for Trailers		
3C	Complete for Motorcycle, ATV & MDC	3D	Complete for Buses, Jitneys and/or Rental Vehicles		
IF NO BOX IS CHECKED, JOINT TENANTS WILL BE SELECTED					
4	TYPE OF OWNERSHIP		REQUIRED RELATIONSHIP		RIGHT OF SURVIVORSHIP
	Spouses (Tenants By the Entirety)		Spouses		Yes
	Joint Tenants		None		Yes
	Tenants in Common		None		No
	Partners		None		Yes
	Transfer on Death*		None		Yes
<p>Complete owner/co-owner information section. Enter physical address if mailing address is PO Box. If name change is indicated, documentation clearly stating the new name, must accompany this form. "Relationship to owner" is required information if the vehicle is registered and titled in more than one name. You must indicate your choice for rights of survivorship.</p> <p>* Transfer on Death requires completion of separate form (Notification of Transfer on Death TA-VT-07) and is only applicable if vehicle is registered to only one owner.</p>					
5A	Complete if you have a loan on this vehicle. If Lien holder is an individual must include Vermont license number and Date of Birth. If there is a second lien holder, send details.				
5B	The name and address of the seller and date purchased is information required for new and transfer Vermont registration, even if the vehicle has been registered and titled to you out-of-state. The signature of seller is required only for dealer transactions and non-titled vehicles when there is no Bill of Sale.				
6A & 6B	<p>Purchase and Use Tax is due at the time of registration and/or title at the rate of 6% (.06) of the purchase price or the average trade-in book value (NADA), whichever is greater, minus value of trade-in vehicle or any other allowable credit. If trade occurs out of state, proof of previous registration is required.</p> <ul style="list-style-type: none"> Autos/SUV's/Antiques/Exhibits/Motor Homes or Motorcycles 6% of net taxable cost. No maximum tax. Trucks and Off-Highway Tractors registered at the 10,099 lb. weight or less, 6% of net taxable cost. No maximum tax. All other vehicles will be taxed at 6% of the net taxable cost - \$1,850.00 maximum tax. You may deduct the amount received from the sale of a vehicle last registered in your name, not to exceed the average book value as shown in the Official Used Car Guide, N.A.D.A. (New England edition), provided such sale occurs within three months of the taxable purchase ATV's are not subject to Purchase & Use Tax, but a Sales & Use Tax does apply. For ATV's purchased from a dealer or a Vermont registered business you must submit proof of tax paid. For ATV's purchased as a casual sale, no tax is due. If tax is due, form SU-452 must be completed and submitted. 				
7	<p>A visual verification of the identification number (serial number) of your vehicle is required if the vehicle is required to be titled and:</p> <ul style="list-style-type: none"> Was last registered/titled in another state (unless purchased from out of state dealer for the purpose of registering in VT), or The vehicle is a motorcycle with an engine size of 300 cc's or more and last registered in another state, or Is a non-titleable motorcycle with an engine size of 500 or more cc's unless proof of a previous VT registration is submitted, or Has a Salvage Title, or Is registered under bond, or Is imported from Canada without a Certificate of Origin or a new vehicle information statement, or The title documentation is from another country, or Has a U.S. Government Certificate of Release of Motor Vehicle document. <p>Verifications completed outside of Vermont must be by motor vehicle officials, or by those personnel authorized by that state to perform VIN verifications. Military personnel may have VIN verifications conducted by the Commanding Officer or Provost Marshal of the military base. Verifications performed out of state must be accompanied by a letter of identification of the verifier on official letterhead.</p>				
8	Application must be signed and dated by owner(s). If signed by an authorized agent, proof of authorization, such as power of attorney, etc. must be submitted. Owner signature certifies liability insurance is in effect for this vehicle pursuant to 23 V.S.A. §800(a).				