

APPLICATION TO TITLE/REG. A VEHICLE

MINNESOTA DEPARTMENT OF PUBLIC SAFETY

Driver and Vehicle Services Division

445 Minnesota St., St. Paul, MN 55101-5185

Phone: 651-297-2126 TTY: 651-282-6555

drive.mn.govVALIDATION AND
OFFICE USE ONLY

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Contact Phone Number for Customer

WEIGHT STICKER NUMBER/MOTORCYCLE ENGINE NO.

A**VEHICLE IDENTIFICATION NUMBER**

MODEL YEAR	MAKE	MODEL	BODY STYLE	VEHICLE COLOR	WEIGHT RATING
VEHICLE TYPE	VEHICLE CLASS	VEHICLE USE TYPE	# PASS.	FUEL TYPE	NEW <input type="checkbox"/> DATE OF ACQUISITION USED <input type="checkbox"/>
AUTO INSURANCE COMPANY	POLICY NUMBER	EXP. DATE	EMPTY WT.	# AXLES	

B

ODOMETER DISCLOSURE STATEMENT. I (WE) CERTIFY THAT THE ODOMETER NOW READS _____ (NO TENTHS) MILES AND TO THE BEST OF MY KNOWLEDGE, THE ODOMETER MILEAGE IS:

- ☐ Actual mileage
☐ In excess of odometer's mechanical limits
☐ Not actual mileage - **WARNING ODOMETER DISCREPANCY**

DAMAGE DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE, THIS VEHICLE:

- ☐ Has (CHECK ONE) SUSTAINED DAMAGE IN EXCESS OF 80 PERCENT ACTUAL CASH VALUE.
☐ Has Not

ASSIGNMENT: I (WE) CERTIFY THAT THIS VEHICLE IS FREE FROM ALL SECURITY INTERESTS. I (WE) WARRANT TITLE AND ASSIGN THE REGISTRATION TAX AND VEHICLE TO THE PERSON(S) NAMED IN SECTION D.

SELLER'S PRINTED NAME(S)	ACQUISITION DATE
SELLER'S ADDRESS	DEALER LICENSE #

X

ALL SELLER'S SIGNATURE(S)

C

IS THIS VEHICLE SUBJECT TO SECURITY AGREEMENT(S)? YES ☐ NO ☐ IF YES, COMPLETE SECTION C.

FIRST SECURED PARTY (PRINT NAME)	DATE OF LOAN	For Additional Secured Parties, Attach Completed Form PS2017	
STREET ADDRESS	CITY	STATE	ZIP CODE

D

If more than two owners, complete a separate attachment with the additional owner's information (must provide all info as below)

FIRST, MIDDLE, LAST NAME	DRIVER'S LICENSE NUMBER / DEALER NUMBER	DATE OF BIRTH
ADDITIONAL PURCHASER(S)/OWNER(S) FIRST, MIDDLE, LAST NAME	DRIVER'S LICENSE NUMBER	DATE OF BIRTH
RESIDENCE STREET ADDRESS	CITY	STATE ZIP CODE
MAILING ADDRESS		

E

You can elect to receive your registration renewals by email. If you select this option, paper renewal notices will not be mailed.

To elect this service please provide an email address for notices to be emailed to: _____

F

This section to be completed if under 18. I CERTIFY BY MY SIGNATURE I HAVE PURCHASED THE VEHICLE DESCRIBED ON THIS APPLICATION. CHECK ONE:

- | | |
|---|---|
| <input type="checkbox"/> I am 17 years old and have completed an approved driver training course. | <input type="checkbox"/> I am an employed, emancipated minor and I have a Minnesota driver's license. |
| <input type="checkbox"/> I am 17 years old and a high school graduate. | <input type="checkbox"/> When I was a resident of a foreign state, I was the duly registered owner of the automobile or truck described on this application. (COMPLETE SECTION G) |

G

"A vehicle acquired by a Minnesota resident is subject to tax as soon as the vehicle is operated on a Minnesota street or highway. An automobile brought into Minnesota by a non-resident must be registered within 60 days; however, if the foreign state vehicle is not currently registered, the vehicle must be registered immediately. Tax for a non-resident is calculated 60 days from date of residency or transaction date, whichever is first; or from the date vehicle is first operated on a Minnesota road or highway."

WERE YOU A MINNESOTA RESIDENT
AT THE TIME OF PURCHASE?
YES ☐ NO ☐

IF NO, WHEN DID YOU BECOME A
MINNESOTA RESIDENT? _____

IF YES, WHEN WAS THE VEHICLE FIRST OPERATED ON A
MINNESOTA ROAD OR HIGHWAY? _____

H

BASE VALUE/MSRP or GROSS WEIGHT

REGISTRATION PERIOD

USDOT Number

From _____ Through _____

MN COUNTY/STATE VEH. IS KEPT _____ Registration Quantity _____

FOR CLASSIC, COLLECTOR, STREET ROD & PIONEER, PLEASE INDICATE DESIRED NUMBER OF PLATES: ☐ One Plate ☐ Two Plates

REGULAR LICENSE PLATE NUMBER OF THE OTHER VEHICLE OWNED OR LEASED BY YOU: _____

NOTE: TRAILERS AND TRUCKS REGISTERED ON A GROSS WEIGHT BASIS MUST BE REGISTERED AT A MINIMUM OF 1.25 TIMES THE EMPTY WEIGHT.

† FOR TRUCKS REGISTERED AT 78,000 OR HIGHER, MUST DECLARE THE NUMBER OF AXLES ON THE FRONT OF THIS APPLICATION.

I

PURCHASER'S MOTOR VEHICLE SALES TAX DECLARATION

1. Full purchase price	\$ _____	MN DEALER LICENSE # _____	ADMIN/REGISTRATION TAX _____ PLATE FEE _____ CONTRIBUTION FEE _____ WHEELAGE TAX _____ TECH SURCHARGE FEE _____ PS VEHICLE FEE _____ TRANSFER TAX _____ TITLE FEE _____ LIEN FEE _____ MV SALES TAX _____ LATE TRANSFER PENALTY _____ SUB-TOTAL _____ STATE/DEPUTY FILING FEE _____ TOTAL DUE _____ <small>(Sales tax due when registered)</small>
2. Less trade-in allowance complete item #6	\$ _____	MN SALES TAX ACCOUNT # _____	
3. Net purchase price	\$ _____	INTERNAL REV. CODE # (IRC) _____	
4. 6.5% of line 3	\$ _____	PRORATE ACCOUNT # _____	
5. Less tax paid to another state	\$ _____	PRORATE FLEET # _____	
		I declare this tax exemption _____	
NET SALES TAX DUE \$ _____		ADDITIONAL FEES:	
6. Trade-in was:		ELECTRIC VEHICLE SURCHARGE _____	
MODEL YR. _____ MAKE _____ PLATE # _____		EXPEDITED TITLE FEE _____	
VIN NUMBER _____		FARM QUARTERLY FEE _____	
WITHOUT PROPER OWNERSHIP/TRANSFER DOCUMENTS (e.g., OUT-OF-STATE CERTIFICATE OF TITLE), NO MINNESOTA TITLE WILL BE ISSUED.		LEASE EXTENSION FEE _____	
		REINSTATEMENT FEE _____	
		SALVAGE INSPECTION FEE _____	
		SPECIAL PLATE TRANSFER FEE _____	

J

Tennessen Warning

What is the purpose of supplying the requested information?

•The information collected on this form is used to apply for a certificate of title pursuant to Minn. Stat. § 168A.02(1).

Am I required to provide the requested information?

•You must provide the information requested within ten days of the date of sale in order to obtain a certificate of title. See Minn. Stat. § 168A.10(2).

What will happen if I do not provide the requested information?

•If you do not provide the requested information, DVS will be unable to process your application for a certificate of title.

Who will have access to the requested information?

•DVS may disclose personal information when it relates to the operation or use of a vehicle or to public safety. The use of personal information relates to public safety if it concerns the physical safety or security of drivers, vehicles, pedestrians or property. Information on an individual provided to register a vehicle may be treated as provided by U.S.C. § 2721, and may be disclosed as required or permitted by that section. Information may be used, rented, or sold solely for bulk distribution by organizations for business purposes including surveys, marketing or solicitation. The registered owner may request, in writing, that their residence address or name and residence address be classified as "private data on individuals," provided the vehicle is not registered to a business. See Minn. Stat. § 168.346(3).

I (We) certify I (we) are of legal age, have purchased this vehicle subject to liens shown and no other. This vehicle is and will continue to be insured while operating upon the public streets and highways. The vehicle will be operated in compliance with the laws that apply to its class of registration. I (we) have received a copy of this application and all of my (our) declarations are true and correct. If applicable, I (we) have knowledge of Federal and State applicable to commercial motor vehicle operation, Minn. Stat. § 221, public service commission rules 1-48 and 49 U.S.C. § 390-399, and if a transporter of hazardous materials, 49 U.S.C. §§ 171-199.

☐ You may disclose my information for any use in response to requests for my individual driver or motor vehicle record.

☐ You may disclose my personal information for bulk distribution for surveys, marketing or solicitations.

Signature _____ DATE _____

Signature _____ DATE _____

ALL PURCHASERS/OWNERS MUST SIGN

DO NOT SIGN UNTIL FORM IS COMPLETED IN ENTIRETY