

DO NOT WRITE IN SHADED AREAS		Old #1	IN LIEU PLATE	TEMP PLATE DATE	490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES /	
DMV Copy TA-VD-119 10/2014		New #1	New #2	Title Brands (max of 9)		<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							
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"/> Agriculture (01) <i>Farm Use</i> <input type="checkbox"/> EMS (46) <input type="checkbox"/> Motor Driven Cycle (17) <input type="checkbox"/> Special Purp Tk Cat I (11) <input type="checkbox"/> ATV (02) <input type="checkbox"/> Amateur Radio Opr (42) <input type="checkbox"/> Exhibition (09) (Ex) <input type="checkbox"/> Municipal (15) <input type="checkbox"/> Special Purp Tk Cat II (20) <input type="checkbox"/> Car/Motor Home (19) <input type="checkbox"/> American Legion (38) <input type="checkbox"/> Farm Tractor (45) <input type="checkbox"/> National Guard (41) <input type="checkbox"/> State (22) <input type="checkbox"/> Motorcycle (18) <input type="checkbox"/> Antique (03) (An) <input type="checkbox"/> Firefighter (40) <input type="checkbox"/> Off-Hwy Tractor (24) <input type="checkbox"/> Street Rod (56) <input type="checkbox"/> School Bus (19) <input type="checkbox"/> Autocycle (12) <input type="checkbox"/> Freemasons (54) <input type="checkbox"/> POW (23) <input type="checkbox"/> US Vet (49) <input type="checkbox"/> Trailer (26, 25, 06) <input type="checkbox"/> Building Bright Futures (55) <input type="checkbox"/> Jitney/Rental (37) <input type="checkbox"/> Purple Heart (47) <input type="checkbox"/> VFW (52) <input type="checkbox"/> Truck (27) <input type="checkbox"/> Conservation Plate (48, 57) <input type="checkbox"/> Lions Club (51) <input type="checkbox"/> Rotary (53) <input type="checkbox"/> Vietnam Vet (50) <input type="checkbox"/> Vanity <input type="checkbox"/> Disabled <input type="checkbox"/> Motor Bus (04, 05) <input type="checkbox"/> Sheriff (43) <input type="checkbox"/> Volunteer (28)							
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"/> 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		# Wheels	
# OF AXLES		BRAKE TYPE <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER		Length/Width Feet & Inches		<input type="checkbox"/> 1500 or less (26) <input type="checkbox"/> 1501 or more (25)		CC's	
<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE		VT DRIVER LICENSE NO		SSN or FEDERAL ID NUMBER		<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		SSN or FEDERAL ID NUMBER		GENDER <input type="checkbox"/> M <input type="checkbox"/> F		Empty Weight	
Name				Name				# Of Passengers	
Mailing Address (PO Box or Street)				Mailing Address (PO Box or Street)				Loaded Weight	
City:		State:		ZIP:		City:		State:	
State:		ZIP:		City:		State:		ZIP:	
Physical Address (Street)				Physical Address (Street)					
City:		State:		ZIP:		City:		State:	
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:									
MUST INDICATE RIGHTS OF SURVIVORSHIP (CHECK ONE BELOW) IF NO BOX IS CHECKED "JOINT TENANTS" WILL BE SELECTED									
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)									
Date of loan		VT license # (if individual)		Date of birth (if individual)		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)	
NET TAXABLE COST		\$		YEAR		MAKE		PLATE	
TAX (6%)		\$		VIN		TAX EXEMPT #		Title	
\$		\$		VIN		TAX EXEMPT #		Transfer	
7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION									
VIN				STATE OF REG				Warranty Fee	\$5.00
DATE		TOWN OR CITY		STATE		Fuel User		12	
STATE		TOWN OR CITY		STATE		Other		31	
AUTHORIZED SIGNATURE				ORGANIZATION				Total Fees	
<input type="checkbox"/> Y <input type="checkbox"/> N		VINASSIST <input type="checkbox"/> Y <input type="checkbox"/> N		PHONE NUMBER		MILEAGE (NO TENTHS)		<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS	
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.									
SIGNATURE (OWNER/LESSEE)				DATE		SIGNATURE (CO-OWNER/LESSOR)			

DO NOT WRITE IN SHADED AREAS		Old #1	IN LIEU PLATE	TEMP PLATE DATE	490 <input type="checkbox"/> C or 490 <input type="checkbox"/> P	REG TYPE	INDEX #	EXPIRES											
Customer Copy TA-VD-119 10/2014		New #1	New #2	Title Brands (max of 9)		<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"/> Agriculture (01) <i>Farm Use</i>		<input type="checkbox"/> EMS (46)		<input type="checkbox"/> Motor Driven Cycle (17)		<input type="checkbox"/> Special Purp Tk Cat I (11)									
PLATE # _____		<input type="checkbox"/> ATV (02)		<input type="checkbox"/> Amateur Radio Opr (42)		<input type="checkbox"/> Exhibition (09) (Ex)		<input type="checkbox"/> Municipal (15)		<input type="checkbox"/> Special Purp Tk Cat II (20)									
<input type="checkbox"/> NEW (421)		<input type="checkbox"/> Car/Motor Home (19)		<input type="checkbox"/> American Legion (38)		<input type="checkbox"/> Farm Tractor (45)		<input type="checkbox"/> National Guard (41)		<input type="checkbox"/> State (22)									
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REPLACEMENT PLATE		<input type="checkbox"/> Trailer (26, 25, 06)		<input type="checkbox"/> Building Bright Futures (55)		<input type="checkbox"/> Jitney/Rental (37)		<input type="checkbox"/> Purple Heart (47)		<input type="checkbox"/> VFW (52)									
<input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> SEIZED		<input type="checkbox"/> Truck (27)		<input type="checkbox"/> Conservation Plate (48, 57)		<input type="checkbox"/> Lions Club (51)		<input type="checkbox"/> Rotary (53)		<input type="checkbox"/> Vietnam Vet (50)									
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<input type="checkbox"/> WEIGHT CHANGE																			
2 MAKE		MODEL		MODEL YEAR		BODY TYPE		MILEAGE (NO TENTHS)		COLOR									
SERIAL NUMBER (VIN)		NO OF CYL		VEHICLE IS		<input type="checkbox"/> GAS <input type="checkbox"/> DIESEL <input type="checkbox"/> HYBRID <input type="checkbox"/> ELECTRIC		<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS											
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3A TRUCKS (including Pick-Up & Farm)				3B TRAILERS				3C MOTORCYCLE ATV/MDC		3D BUS/JITNEY/RENTAL									
Empty Weight		Loaded Weight		Empty Weight		LOADED WEIGHT		# Wheels		CC's		Empty Weight							
# OF AXLES		BRAKE TYPE <input type="checkbox"/> HYD <input type="checkbox"/> AIR <input type="checkbox"/> OTHER		Length/Width Feet & Inches		<input type="checkbox"/> 1500 or less (26) <input type="checkbox"/> 1501 or more (25)		<input type="checkbox"/> Autocycle		# Of Passengers Loaded Weight									
<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 MUST INDICATE RIGHTS OF SURVIVORSHIP (CHECK ONE BELOW) IF NO BOX IS CHECKED "JOINT TENANTS" WILL BE SELECTED																			
<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	
VIN						STATE OF REG						Fuel User		31					
DATE		TOWN OR CITY				STATE						Other							
AUTHORIZED SIGNATURE						ORGANIZATION						Total Fees							
<input type="checkbox"/> Y <input type="checkbox"/> N		VINASSIST <input type="checkbox"/> Y <input type="checkbox"/> N		PHONE NUMBER		MILEAGE (NO TENTHS)				<input type="checkbox"/> MILES <input type="checkbox"/> KM <input type="checkbox"/> HOURS		Return #		Rater #		RF			
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)											

1	Choose the one that best describes your registration		
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. Transfer Fee: \$23.00, ATV Transfer Fee: \$10.00 		
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. 		
Additional Forms Required for the following plates			
POW (23)	EMS (46)	LIONS CLUB (51)	FREE MASON (54)
VFW (52)	VANITY	DISABLED PLATE	AMATEUR RADIO OPR (42)
NAT'L GUARD (41)	ROTARY (53)	FIRE FIGHTER (40)	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, Autocycle & MDC	3D	Complete for Buses, Jitneys and/or Rental Vehicles
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.			
4A & 4B	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 or Transfer on Death	None	Yes
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. IF NO BOX IS CHECKED, JOINT TENANTS WILL BE SELECTED			
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 NADA value, 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, 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).		

In cases where a temporary registration needs to be issued, i.e., supporting documents missing, the owner must be present to sign the authorization for temporary plate