

**STATE OF ALASKA
DIVISION OF MOTOR VEHICLES
VEHICLE TRANSACTION APPLICATION**

Registered Owner		Current License Plate Number	Serial Number (VIN)	
Year	Make	Model	Body Style	Color

I would like to:

- Transfer my license plate to another vehicle**
- Request a new plate design**
- Replace a lost plate or tab** (circle one)
- Change my registration month to** _____
- Other:** (list in comment section)

Comments: _____

I certify under penalty of law: there is a liability insurance policy for this vehicle if required by AS 28.22.011 and this policy will be maintained during the entire registration period.

Printed Name and Signature	Date
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DMV USE ONLY

New Plate	Tab Number	Batch	AMVC / Office	Fee CA CC CK
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