

# You must complete, and submit, **both** of the following pages

*Save Time – Complete before printing*

*Save Paper – Print only pages 2 & 3*

## Section 1

- **New** - First time registration; new plates issued. Complete entire application.
- **Transfer** - Transfer of existing Vermont registration from one vehicle to another, complete the entire application. A change of legal ownership of your previous vehicle must occur before a transfer will be allowed.
- **Renewal** - Complete Sections 1, 2, 3 (if applicable) 4 and 8.

- **Replacement** - Complete Sections 1, 2, 3 (if applicable) 4 and 8.
- **IRP** - Complete this form for Title and Purchase & Use Tax purposes. Separate 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** - Changing weight on a currently registered vehicle.

## Section 2

- Complete entire section for all types of vehicles

## Section 3A

- Complete for Trucks including Pick-Up Trucks, Agricultural Vehicles, Cargo Vans, etc.

## Section 3B

- Complete for Trailers

## Section 3C

- Complete for Motorcycle, ATV, Autocycle or Motor Driven Cycle (Moped)

## Section 3D

- Complete for Buses, Jitneys and/or Rental Vehicles

Additional Forms Required for the following plates

POW (23)	EMS (46)	Lions Club (51)	Free Masons (54)	Purple Heart(47)
VFW (52)	Vanity	Disabled Plate	Amateur Radio OPR (42)	Pearl Harbor (44)
National Guard (41)	Rotary (53)	Fire Fighter (40)	US Veterans (49)	Vietnam Veterans (50)
				American Legion (38)

## Section 4

- 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.
  - **Spouses** (Tenants by the Entirety)
  - **Joint Tenants** (Survivorship Rights) - IF NO BOX IS CHECKED, JOINT TENANTS WILL BE SELECTED
  - **Tenants in Common** (No Survivorship Rights)
  - **Partners** (business partners)
  - **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.

## Section 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.

## Section 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.

## Section 6

- 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.
  - 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.

## Section 7

- A visual verification of the identification number (serial number) of your vehicle is required if the vehicle is required to be titled and:
  - 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.

## Section 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

<b>DO NOT WRITE IN SHADED AREAS</b>  <b>DMV Copy</b>  TA-VD-119 01/2016	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"/> LP	<input type="checkbox"/> 233 <input type="checkbox"/> 452 <input type="checkbox"/> 2 Year		
<b>1A TRANSACTION TYPE</b>	<b>1B PLATE TYPE</b>									
<b>PLATE #</b> _____  <input type="checkbox"/> New Registration (421)  <input type="checkbox"/> Transfer Registration (431)  <input type="checkbox"/> Renew Registration (475)  <input type="checkbox"/> Replacement Registration  <input type="checkbox"/> IRP Tax & Title  <input type="checkbox"/> Weight Change	<input type="checkbox"/> Agriculture (01) <i>Farm Use</i> <input type="checkbox"/> ATV (02) <input type="checkbox"/> Car/Motor Home (19) <input type="checkbox"/> Motorcycle (18) <input type="checkbox"/> School Bus (19) <input type="checkbox"/> Trailer (26, 25, 06) <input type="checkbox"/> Truck (27) <input type="checkbox"/> Vanity			<input type="checkbox"/> EMS (46) <input type="checkbox"/> Exhibition (09) (Ex) <input type="checkbox"/> Farm Tractor (45) <input type="checkbox"/> Firefighter (40) <input type="checkbox"/> Freemasons (54) <input type="checkbox"/> Jitney/Rental (37) <input type="checkbox"/> Lions Club (51) <input type="checkbox"/> Motor Bus (04, 05)		<input type="checkbox"/> Motor Driven Cycle (17) <input type="checkbox"/> Municipal (15) <input type="checkbox"/> National Guard (41) <input type="checkbox"/> Off-Hwy Tractor (24) <input type="checkbox"/> POW (23) <input type="checkbox"/> Purple Heart (47) <input type="checkbox"/> Rotary (53) <input type="checkbox"/> Sheriff (43)		<input type="checkbox"/> Special Purp Tk Cat I (11) <input type="checkbox"/> Special Purp Tk Cat II (20) <input type="checkbox"/> State (22) <input type="checkbox"/> Street Rod (56) <input type="checkbox"/> US Vet (49) <input type="checkbox"/> VFW (52) <input type="checkbox"/> Vietnam Vet (50) <input type="checkbox"/> Volunteer (28)		
<b>2</b>	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				
<b>3A TRUCKS (including Pick-Up &amp; Farm)</b>			<b>3B TRAILERS</b>			<b>3C MOTORCYCLE ATV/MDC</b>		<b>3D BUS/JITNEY/RENTAL</b>		
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"/> Autocycle		
<b>4A</b>		<b>4B</b>		<b>4C</b>		<b>4D</b>		<b>4E</b>		
<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE		VT Driver License # Federal ID #		GENDER <input type="checkbox"/> M <input type="checkbox"/> F		<input type="checkbox"/> CO-OWNER <input type="checkbox"/> LESSOR		VT Driver License # Federal ID # 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:		State:			ZIP:		
Physical Address (Street)					Physical Address (Street)					
City:			State:		ZIP:		City:			
State:			ZIP:		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:										
<b>4B</b> <input type="checkbox"/> Spouses <input type="checkbox"/> Joint Tenants (JTEN) <input type="checkbox"/> Tenants In Common <input type="checkbox"/> Business Partners <input type="checkbox"/> Transfer on Death (requires form T-07)										
<b>5A</b>			<b>5B</b>							
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	
<b>6A Purchase Price</b>			<b>6B Complete Section 6B to Claim Tax Credit or to Transfer Plates</b>				<b>9 DO NOT WRITE IN SHADED AREA</b>			
Purchase Price		\$		Purchaser Of Old Vehicle				Registration (1)		
Tax Credit		\$		City		State		On (Date)		Tax (2)
Net Taxable		\$		Year		Make		Plate		Tax Exempt #
Tax (6%)		\$		VIN				Title (3)		
								Transfer (4)		
<b>7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION</b>										
VIN					State of Reg					
Date			Town Or City		State		Fuel User (31)			
Other										
Authorized Signature				Organization				<b>Total Fees</b>		
NCIC <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 #
Rate #		Rate #		RF						
<b>8</b>										
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)				

<b>DO NOT WRITE IN SHADED AREAS</b>  <b>DMV Copy</b>  TA-VD-119 01/2016	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"/> LP	<input type="checkbox"/> 233 <input type="checkbox"/> 452 <input type="checkbox"/> 2 Year			
<b>1A TRANSACTION TYPE</b>	<b>1B PLATE TYPE</b>										
<b>PLATE #</b> _____	<input type="checkbox"/> Agriculture (01) <i>Farm Use</i> <input type="checkbox"/> ATV (02) <input type="checkbox"/> Car/Motor Home (19) <input type="checkbox"/> Motorcycle (18) <input type="checkbox"/> School Bus (19) <input type="checkbox"/> Trailer (26, 25, 06) <input type="checkbox"/> Truck (27) <input type="checkbox"/> Vanity			<input type="checkbox"/> EMS (46) <input type="checkbox"/> Exhibition (09) (Ex) <input type="checkbox"/> Farm Tractor (45) <input type="checkbox"/> Firefighter (40) <input type="checkbox"/> Freemasons (54) <input type="checkbox"/> Jitney/Rental (37) <input type="checkbox"/> Lions Club (51) <input type="checkbox"/> Motor Bus (04, 05)				<input type="checkbox"/> Motor Driven Cycle (17) <input type="checkbox"/> Municipal (15) <input type="checkbox"/> National Guard (41) <input type="checkbox"/> Off-Hwy Tractor (24) <input type="checkbox"/> POW (23) <input type="checkbox"/> Purple Heart (47) <input type="checkbox"/> Rotary (53) <input type="checkbox"/> Sheriff (43)		<input type="checkbox"/> Special Purp Tk Cat I (11) <input type="checkbox"/> Special Purp Tk Cat II (20) <input type="checkbox"/> State (22) <input type="checkbox"/> Street Rod (56) <input type="checkbox"/> US Vet (49) <input type="checkbox"/> VFW (52) <input type="checkbox"/> Vietnam Vet (50) <input type="checkbox"/> Volunteer (28)	
<b>2</b>	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				
<b>3A TRUCKS (including Pick-Up &amp; Farm)</b>	<b>3B TRAILERS</b>			<b>3C MOTORCYCLE ATV/MDC</b>		<b>3D BUS/JITNEY/RENTAL</b>					
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					
<b>4A</b>	<input type="checkbox"/> OWNER <input type="checkbox"/> LESSEE		GENDER <input type="checkbox"/> M <input type="checkbox"/> F	<input type="checkbox"/> CO-OWNER <input type="checkbox"/> LESSOR		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:											
<b>4B</b>	<input type="checkbox"/> Spouses <input type="checkbox"/> Joint Tenants (JTEN) <input type="checkbox"/> Tenants In Common <input type="checkbox"/> Business Partners <input type="checkbox"/> Transfer on Death (requires form T-07)										
<b>5A</b>	Date of loan	VT license # (if individual)	Date of birth (if individual)	<b>5B</b>			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			
<b>6A Purchase Price</b>	<b>6B Complete Section 6B to Claim Tax Credit or to Transfer Plates</b>			<b>9 DO NOT WRITE IN SHADED AREA</b>							
Purchase Price	\$	Purchaser Of Old Vehicle			Registration (1)						
Tax Credit	\$	City State On (Date)			Tax (2)						
Net Taxable	\$	Year	Make	Plate	Tax Exempt #	Title (3)					
Tax (6%)	\$	VIN			Transfer (4)						
<b>7 VERIFICATION OF VEHICLE IDENTIFICATION NUMBER - APPLICANT SHOULD NOT WRITE IN THIS SECTION</b>											
VIN				State of Reg		Warranty Fee (12) \$5.00		NEW Vehicles Only			
Date		Town Or City		State		Fuel User (31)					
Authorized Signature			Organization			<b>Total Fees</b>					
NCIC <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	
<b>8</b>				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)					