

INTERNATIONAL REGISTRATION PLAN SCHEDULE A & C — Part 5

ACCOUNT #:

VEHICLE UNIT # (OEN) _____

A) VEHICLE IDENTIFICATION NU	B) YEAR	C) MAKE	D) V	EHICLE TYPE	E) FUEL/CYI	F) WHEELBASE					
G) UNLADEN WT H) SEATS I)	AXLES J) COMBINED AX		L) OWNER NAME								
M) TITLE DOC. # N) TITI	XPAYER ID # (1	PAYER ID # (TIN)			P) SAFETY US DOT #						
Q) Will vehicle safety responsil change during the year? □	-	AME									
S) MAXIMUM DESIRED WEIGHT		U) PURCHASE DATE V)) FACTORY PRICE						
W) INS. CO. CODE	X) CURRENT F	CURRENT PLATE # Y) CURRENT PLAT			LATE CLASS Z) SPECIAL USE						
REGISTRATION IF THE REGISTRANT IS NOT THE OWNER, fill in the information below. Proof of ownership and proof of the AUTHORIZATION OWNER'S name and date of birth are required.											
Owner's Name	Owner's Name				Date of Birth	Is the vehicle leased?					
Address	ress Apt. No. City				St	State Zip Code					
I authorize the person named in number 3 of Part 1 to register this vehicle.											
Owner's Authorized Signature X Date:											
If signing for a corporation, print your full name and title here											
VEHICLE UNIT # (OEN)											
A) VEHICLE IDENTIFICATION NU	B) YEAR	C) MAKE	D) ∨	EHICLE TYPE	E) FUEL/CYI	F) WHEELBASE					
G) UNLADEN WT H) SEATS I)	AXLES J) COMBINED AX	LES K) COLOR	L) OWNER NAME								
M) TITLE DOC. # N) TITI) TITLE DOC. # N) TITLE DOC. JUR. O) SAFETY TAXPAYER ID # (TIN) P) SAFETY US DOT #							
Q) Will vehicle safety responsibility R) SAFETY NAME change during the year? ☐ Yes No											
S) MAXIMUM DESIRED WEIGHT		U) PURCHASE DATE		V) FACTORY PRICE							
V) INS. CO. CODE		X) CURRENT F	PLATE # Y) CL		RENT PLATE CLASS		PECIAL USE				
REGISTRATION IF THE REGISTRANT IS NOT THE OWNER, fill in the information below. Proof of ownership and proof of the OWNER/S name and date of birth are required.											
Owner's Name					Date of Birth Is th						
Address		Apt. No.	City		State Zip Code						
I authorize the person named in number 3 of Part 1 to register this vehicle.											
Owner's Authorized Signature X Date:											
If signing for a corporation, print your full name and title here											

PART 5 (continued)

VEHICLE INFORMATION FOR NEW ACCOUNTS, ADDITIONS, OR CHANGES

ACCOUNT #:

VEHICLE UNIT # (OEN) ____

A) VEHICLE IDENTIFICATION NUMBER		B) YEAR	C) MAKE	D) VEH	ICLE TYPE	E) FUEL/CYL	F) WHEELBASE					
G) UNLADEN WT H) SEATS	I) AXLES J) COMBIN	IED AXLES K) COLOF	R L) OWNER NAME									
M) TITLE DOC. # N) T	ITLE DOC. JUR. 0) SAF	ETY TAXPAYER ID # (TIN)		P) SA	FETY US DOT	-#					
			·									
Q) Will vehicle safety responsibility R) SAFETY NAME change during the year? Yes No												
S) MAXIMUM DESIRED WEIGH		E	U) PURCHASE DATE			V) FACTORY PRICE						
					, 							
W) INS. CO. CODE		X) CURRENT I	PLATE #	Y) CURRENT	PLATE CLAS	SS Z) SP	ECIAL USE					
REGISTRATION IF THE REGISTRANT IS NOT THE OWNER, fill in the information below. Proof of ownership and proof of the OWNER'S name and date of birth are required.												
Owner's Name	vner's Name			Di	Date of Birth Is the vehicle le							
Address	Apt. No. City				State Zip Code							
I authorize the person named	in number 3 of Part 1 to	register this vehicle.										
Owner's Authorized Signature X Date:												
If signing for a corporation, print your full name and title here												
VEHICLE UNIT # (OEN)												
A) VEHICLE IDENTIFICATION		B) YEAR	C) MAKE	D) VEH	ICI E TYPE	E) FUEL/CYL	F) WHEELBASE					
							.,					
G) UNLADEN WT H) SEATS	I) AXLES J) COMBIN	ED AXLES K) COLOF	R L) OWNER NAME									
M) TITLE DOC. # N) T	ETY TAXPAYER ID # (AYER ID # (TIN)			P) SAFETY US DOT #							
Q) Will vehicle safety respon change during the year? [•	ETY NAME										
S) MAXIMUM DESIRED WEIGHT T) PURCHASE PRICE		E	U) PURCHASE DATE		V) FACTORY PRICE							
W) INS. CO. CODE		X) CURRENT		Y) CURRENT		SS 7) SP	ECIAL USE					
				I) OORALEITI								
REGISTRATION IF THE REGISTRANT IS NOT THE OWNER, fill in the information below. Proof of ownership and proof of the OWNER'S name and date of birth are required.												
Owner's Name						Date of Birth Is						
Address	Apt. No. City State Zip Co			Code								
I authorize the person named	in number 3 of Part 1 to	register this vehicle.										
Owner's Authorized Signature X Date:												
If signing for a corporation, print your full name and title h	ere											

