



Office Use Only
Batch File No.
Class
Three of Name
Activity
Renewal
Activity W/RR
Renew W/RR
Orig
Lease Buyout
Dup
Sales Tax with Title
Sales Tax Only without Title

INSTRUCTIONS

- A. Is this vehicle being registered only for personal use?
B. Complete the Certification in Section 6.
C. Refer to form MV-82.1 Registering/Titling a Vehicle in New York State for information to complete this form.

SECTION 1

I WANT TO: REGISTER A VEHICLE, RENEW A REGISTRATION, GET A TITLE ONLY, CHANGE A REGISTRATION, REPLACE LOST OR DAMAGED ITEMS, TRANSFER PLATES
NAME OF PRIMARY REGISTRANT, FORMER NAME, NYS driver license ID number, DATE OF BIRTH, SEX, TELEPHONE or MOBILE PHONE NUMBER, NAME OF CO-REGISTRANT, EMAIL, NYS driver license ID number, DATE OF BIRTH, SEX, ADDRESS CHANGE?, THE ADDRESS WHERE PRIMARY REGISTRANT GETS MAIL, THE ADDRESS WHERE PRIMARY REGISTRANT RESIDES IF DIFFERENT FROM THE MAILING ADDRESS.

SECTION 2

VEHICLE IDENTIFICATION NUMBER, VEHICLE DESCRIPTION, Body Type, Color, Unladen Weight, Type of Power (Fuel), Cylinders, Maximum Gross Weight, Adult Seating Capacity, Odometer Reading in Miles, Mileage Brand, Office Use Only, For commercial vehicles, Is this vehicle a limousine, stretch limousine or otherwise altered to increase seating capacity?

SECTION 3

If the OWNER of the vehicle is DIFFERENT from the REGISTRANT, the OWNER must complete this section. PRIMARY OWNER NYS License Number, NAME OF PRIMARY OWNER, PRIMARY OWNER DATE OF BIRTH, PRIMARY OWNER SEX, THE ADDRESS WHERE PRIMARY OWNER GETS MAIL, NAME OF CO-OWNER, REGISTRATION AUTHORIZATION

X (Signature of ALL owner(s) and proof of ID required when first applying for a NYS title. See form ID-82 - Proofs of Identity for Registration and Title.) (Date)

OFFICE USE ONLY
New Plate, New Class, Ins. Co. Code, Special Conditions, Sales Tax, Status, Value (\$), Rate, Out of State, Jurisdiction, Audit, Prior Owner, Issuance State, Title, Lien, Lien Number, Lien Release, Proof Submitted, Reg/Title, State, Stop/Response/Scoff Law, Approved By, Date

SECTION 4

DAMAGE DISCLOSURE

Has the vehicle been wrecked, destroyed, or damaged to such an extent that the total estimate, or actual cost, of parts and labor to rebuild or reconstruct the vehicle to the condition it was in before an accident, and to make the vehicle legal to operate on the road or highways, is more than 75% of the retail value of the vehicle at the time of loss? Yes No

If you marked **YES**, the vehicle must have an anti-theft examination before it is registered. The title that is issued will have the statement "Rebuilt Salvage" on it.

VEHICLE MODIFICATIONS

Has this vehicle been modified from the original manufacturer specifications without extending the chassis or lengthening the wheel base? (Examples include: color changes, added seats, permanently mounted camping equipment, multi-stage vehicles.) If "Yes," describe the modifications: Yes No

SECTION 5

NON-PERSONAL VEHICLE USE

* Vehicles that transport passengers may require NYS DOT Operating Authority (see <https://www.dot.ny.gov/divisions/operating/osss/bus/passenger>), NYS DOT Inspection (see <https://www.dot.ny.gov/divisions/operating/osss/bus/inspection>) and/or be subject to Article 19-A requirements (see <https://dmv.ny.gov/motor-carriers/information-and-forms-article-19>).

Check one:

- | | | |
|---|--|---|
| <input type="checkbox"/> A commercial tow truck with a gross vehicle weight rating of at least 8,600 pounds | <input type="checkbox"/> Ambulette* | <input type="checkbox"/> Operates as a taxi* (you must complete the "Taxis Only" section below) |
| <input type="checkbox"/> Used only as a farm vehicle (form MV-260F, Part 1 must be submitted) | <input type="checkbox"/> Hearse | <input type="checkbox"/> Rented without a driver (private rental) |
| <input type="checkbox"/> Used only as an agricultural truck or agricultural trailer | <input type="checkbox"/> Combination Hearse/Invalid Coach* | <input type="checkbox"/> Used to pick up passengers for compensation only in jurisdictions that do not regulate taxis* |
| <input type="checkbox"/> Ambulance | <input type="checkbox"/> Used to transport passengers* (Bus, Livery, School Bus, School Car) | <input type="checkbox"/> Other - describe the use: _____ |

INSURANCE REQUIREMENTS

- | | |
|--|---|
| <input type="checkbox"/> For Hire (direct or indirect compensation) - Submit an FH Certificate | <input type="checkbox"/> DOT Operation - Submit and record the NYS DOT Permit and/or the Federal DOT Permit number: _____ |
| <input type="checkbox"/> Not For Hire - Submit a current and valid NYS Insurance ID Card | |

TAXIS ONLY (check one)

- | | |
|--|--|
| <input type="checkbox"/> Vehicle is used in New York City, Westchester, or Nassau counties. | <input type="checkbox"/> Vehicle is used for pick up in a jurisdiction that regulates taxis other than NYC, Westchester county, or Nassau county. |
| <input type="checkbox"/> Vehicle is used as a contract carrier in NYC (commuter van with seating capacity between 9 and 14). You are eligible for LIVERY plates. | |

SECTION 6

CERTIFICATION

I certify that the information I have given on this application and on any documentation provided in support of this application is true and complete. I certify that the vehicle is fully equipped as required by the Vehicle and Traffic Law, and has passed the required New York State inspection, or has qualified for a time extension (form VS-1077) and will be inspected within 10 days. I certify that appropriate insurance coverage is in effect, that the vehicle will be operated in accordance with the Vehicle and Traffic Law, and that I am not the subject of any unsatisfied notices of violation from a tolling authority. If I am applying for replacement registration items, I certify that the registration is not currently under suspension or revocation. If I have plates in a series reserved for a special group, I certify that I am still eligible to receive them, and that I have only one set of these plates. **If I am using a credit card for payment of any fees in connection with this application, I understand that my signature below also authorizes use of my credit card.**

WARNING: Intentionally making a false statement or providing false or misleading information in connection with this application is a criminal offense that may subject you to prosecution under the law.

Print Name Here _____
(Print Name in Full - if registering for a corporation, print your full name and title)

Print Additional Name Here _____
(Print Name in Full)

Sign Here **X** _____
(Sign Here)

Additional Signature **X** _____
(Sign Here - Additional signature required for a partnership or if registering this vehicle in more than one name.)