



Title Only

## CERTIFICATE OF TITLE/TEMPORARY TAG APPLICATION

Please **<u>PRINT</u>** the information on this application.

A valid DC Driver License, DC Identification Card, DC Business License, DC Certificate of Occupancy, or a government issued document showing DC Tax Identification Number must accompany this application; AND Power of Attorney for a Dealer Temporary Tag.

One Year Registration

□ Two Year Registration

□ One Year Registration with Residential Parking Permit (RPP)

□ Two Year Registration with Residential Parking Permit (RPP)

 TYPE OF SERVICE

 Temporary Tag
 New Title/New Tags

 Salvage Title
 Non-Repairable Title

New Title/Transfer TagsDuplicate Title

APPLICANT INF	ORMATION	(If a leased veh	icle – provide t	the name	of the L	essor an	d attach	leas	se agreement)		
OWNER/LESSOR FULL NAME (Last, First, Middle)					DATE OF BIRTH		STATE DRIVER LICENSE OR ID CARD #		SE OR ID CARD #		
BUSINESS NAME						FEDE	FEDERAL EMPLOYEE IDENTIFICATION #				
<b>JOINT OWNER(S) FULL NAME</b> (Last, First, Middle) (If vehicle is leased, the lessee's name will not appear on the title)					DATE OF BIRTH DRIVER			DRIVER LIC	ICENSE OR ID CARD #		
CURRENT ADD	RESS (Addres	ss must match D	C Driver Licens	e, DC Ide	ntificatio	on Card or	DC Busi	ness	License or state licer	nse for t	emporary tag)
	AD	DRESS			UN	JNIT/APT		CITY/STATE		ZIP CODE	
VEHICLE INFOR	RMATION										·
MAKE	YEAR	BODY	TITLE B	RAND	ND UNLADEN WEIGHT VEHICLE IDENTIFICATIO						TION NUMBER
ACTUAL MILEAGE I certify to the best of my knowledge that actual mileage is											
LIEN INFORMATION (A Lien agreement must accompany this application. If a lien exists, the title will be mailed to the Lien holder)									DATE:		
Name of Lien Holders					Lien Holders Address				Lien Amount		
INSURANCE CO	OMPANY INF	ORMATION (	Current Proof of	f DC Insur	ance mu	ust accom	pany this	app	lication)		
Name of Insurance Company				Policy Number			Policy Effective Dat		olicy Effective Date		Expiration Date
				olation of D	DC Law a		to a fine of		f. Any person(s) using a t more than \$1,000 or 1		s name or address and/or imprisonment or both.
Signature of Owner/Lessor:								Date:			
Signature of Joint Owner/Lessee:								Date:			
Signature of Joint Owner/Lessee:									Date:		

(Must be signed by Owner(s), Officer of Corporation or Partner in Partnership)

OFFICIAL DMV USE									
EXCISE TAX	SELLING PRIC	E (New Vehicles)	NADA BUSINESS/FAIR MARKET VALUE (Used Vehicles)						
\$	\$		\$						
TITLE # OR TEMPO	RARY TAG #	Approval by DMV Examiner		Date	Operator's Number				

If you have questions, please visit our website www.dmv.dc.gov or call 311 in DC or 202-737-4404 outside the (202) area code. To report waste, fraud, or abuse by any DC Government Agency or official, call the DC Inspector General at 1-800-521-1639.