

# V1

## STATE OF ALASKA DIVISION OF MOTOR VEHICLES TITLE AND REGISTRATION TRANSACTION APPLICATION

<b>SERVICE TYPE(S)</b>	<input type="checkbox"/> TITLE & REGISTRATION	<input type="checkbox"/> REPLACEMENT TITLE	<input type="checkbox"/> ADD LIENHOLDER
	<input type="checkbox"/> TITLE ONLY	<input type="checkbox"/> REPLACEMENT LICENSE PLATE(S)	<input type="checkbox"/> REMOVE LIENHOLDER
	<input type="checkbox"/> REGISTRATION ONLY	<input type="checkbox"/> REPLACEMENT REGISTRATION DOCUMENT	<input type="checkbox"/> OTHER _____
	<input type="checkbox"/> REGISTRATION RENEWAL	<input type="checkbox"/> REPLACEMENT REGISTRATION TAB(S)	_____

<b>VEHICLE INFORMATION</b>	<input type="checkbox"/> CURRENT LICENSE PLATES    OR <input type="checkbox"/> REQUESTING NEW STANDARD PLATES    OR <input type="checkbox"/> REQUESTING NEW PERSONALIZED PLATES			
	VEHICLE IDENTIFICATION NUMBER		EMPTY WEIGHT (LBS)	<input type="checkbox"/> ACTUAL <input type="checkbox"/> ESTIMATED
	YEAR	MAKE	MODEL	BODY STYLE      COLOR

<b>VEHICLE OWNER NAME(S)</b>	OWNER FULL LEGAL NAME	ALASKA DL/ID#, DOB, SSN, or TIN
	CO-OWNER FULL LEGAL NAME	ALASKA DL/ID#, DOB, SSN, or TIN
	OWNER TYPE:	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> COMPANY <input type="checkbox"/> LESSOR <input type="checkbox"/> TRUST <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> GOVERNMENT
	CO-OWNER TYPE:	<input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> COMPANY <input type="checkbox"/> LESSEE <input type="checkbox"/> TRUST <input type="checkbox"/> NON-PROFIT <input type="checkbox"/> GOVERNMENT
	CONJUNCTION:	<input type="checkbox"/> OR - Any owner can sell vehicle independently. <input type="checkbox"/> AND - Requires signatures of all owners to sell vehicle.

<b>ADDITIONAL INFORMATION</b>	MAILING ADDRESS OF OWNER OR LESSOR	CITY	STATE	ZIP
	RESIDENCE ADDRESS OF OWNER OR LESSEE	CITY	STATE	ZIP
	OWNER EMAIL ADDRESS	OWNER PHONE NUMBER		
	LIENHOLDER	MAILING ADDRESS OF LIENHOLDER		
	UPDATE ORGAN DONOR STATUS OF:	<input type="checkbox"/> OWNER <input type="checkbox"/> CO-OWNER <input type="checkbox"/> DONATE TO ORGAN DONATION PROGRAM \$ _____		
	ADDITIONAL AFFIDAVIT SECTION	<input type="checkbox"/> Application submitted by mail. <input type="checkbox"/> Vehicle will be held in dealership inventory.		

<b>OWNER SIGNATURE</b>	I/we certify under penalty of perjury that all information provided on this application is true and I/we will maintain liability insurance that complies with AS 28.22011. I/we understand that false statements are punishable under AS 11.56.210 and AS 15.56.050.			
	OWNER SIGNATURE	DATE	CO-OWNER SIGNATURE	DATE

If you would like to apply for a registration exemption, register your vehicle commercially, register to vote or are subject to Heavy Vehicle Use Tax (HVUT) please fill out relevant section(s) on the back of this form. If this does not apply to you, you may leave the back blank.

<b>EXEMPTION REQUEST</b>	NAME OF PERSON REQUESTING REGISTRATION EXEMPTION	
	<input type="checkbox"/> PERMANENT <input type="checkbox"/> MILITARY <input type="checkbox"/> NATIONAL GUARD <input type="checkbox"/> GOVERNMENT <input type="checkbox"/> CHARITABLE <input type="checkbox"/> MOBILITY DISABILITY <input type="checkbox"/> DISABLED VETERAN <input type="checkbox"/> SENIOR <input type="checkbox"/> TRAILER <input type="checkbox"/> OTHER	Vehicle must be at least eight years old with an owner living in an eligible area. Owner must show a leave and earnings statement that was issued within the past 90 days. Owner must have current military identification and Alaska unit documentation. Vehicle must be registered in the name of a government organization. Must be Alaskan organization with proof of tax exempt status with IRS documentation. Owner must be an Alaskan resident and submit form 861 with signature from qualified provider. Owner must be an Alaskan resident and show proof of service related disability and service discharge. Owner must be an Alaskan resident and at least 65 years of age. Owner must live in an eligible area.

<b>COMMERCIAL VEHICLES AND VEHICLES SUBJECT TO HVUT</b>	DOT NUMBER OF CARRIER RESPONSIBLE FOR SAFE OPERATION	TAX ID NUMBER OF RESPONSIBLE CARRIER
	1. Are you requesting dual commercial registration with another state? <input type="checkbox"/> NO <input type="checkbox"/> YES, State _____ 2. Will this vehicle be operated as a tour bus? <input type="checkbox"/> NO <input type="checkbox"/> YES, Passenger Capacity _____ 3. Was the vehicle purchased within sixty days of this application? <input type="checkbox"/> YES <input type="checkbox"/> NO 4. If no, have you submitted HVUT documentation (Form 2290)? <input type="checkbox"/> YES <input type="checkbox"/> NO, Sign declaration: <p style="margin-left: 40px;"><i>HVUT Declaration: Motor vehicles with a taxable gross weight of 55,000 pounds or more are subject to HVUT compliance. Taxable gross weight is defined as the total weight of the empty weight of the motor vehicle, the empty weight of the trailer or semi-trailers customarily used with the motor vehicle, and the maximum load carried by the motor vehicle and on trailers or semi-trailers customarily used in combination with the motor vehicle. Under penalty of law, I certify, by signing below, during the taxable period which includes the application date for registration, such vehicle had a taxable gross weight of less than 55,000 pounds and is not subject to HVUT.</i></p> <p>_____</p> <p>SIGNATURE OF OWNER/AGENT</p>	
5. Is vehicle subject to PRISM? <input type="checkbox"/> YES <input type="checkbox"/> NO - Sign declaration below. <p style="margin-left: 40px;"><i>PRISM Declaration: I certify under penalty of perjury that I am the owner or agent of the vehicle listed on this application and, if not listed on the application, the vehicle listed does not require a USDOT number.</i></p> <p>_____</p> <p>SIGNATURE OF OWNER/AGENT</p>		

<b>VOTER REGISTRATION</b>	This vehicle registration application can register you to vote or update your voter registration. To register to vote, you must be a US Citizen, an Alaska resident, and 18 years of age or older, or within 90 days of turning 18. If you meet these requirements, are not registered to vote in another jurisdiction or agree to cancel that registration, and wish to register to vote or update your voter registration, sign below.	
	OWNER SIGNATURE	CO-OWNER SIGNATURE

<b>DMV USE ONLY SECTION</b> Revision Date: 3/22	LDAP/OFFICE: _____	ADDITIONAL INFORMATION:
	DATE: _____	
	BATCH #: _____	
	PAYMENT TYPE: _____	
	CLASS CODE: _____	
	DOCUMENTS ACCEPTED: _____	