

Application for Texas Title and/or Registration

Applying for (please check one): <input type="checkbox"/> Title & Registration <input type="checkbox"/> Title Only <input type="checkbox"/> Registration Purposes Only <input type="checkbox"/> Nontitle Registration						TAX OFFICE USE ONLY						
For a corrected title or registration, check reason: <input type="checkbox"/> Vehicle Description <input type="checkbox"/> Add/Remove Lien <input type="checkbox"/> Other: _____						County: _____	Doc #: _____	<input type="checkbox"/> SPV <input type="checkbox"/> Appraisal Value \$ _____				
1. Vehicle Identification Number			2. Year	3. Make	4. Body Style	5. Model	6. Major Color	7. Minor Color				
8. Texas License Plate No.		9. Odometer Reading (no tenths)		10. This is the Actual Mileage unless the mileage is: <input type="checkbox"/> Not Actual <input type="checkbox"/> Exceeds Mechanical Limits <input type="checkbox"/> Exempt			11. Empty Weight		12. Carrying Capacity (if any)			
13. Applicant Type <input type="checkbox"/> Individual <input type="checkbox"/> Business <input type="checkbox"/> Government <input type="checkbox"/> Trust <input type="checkbox"/> Non-Profit						14. Applicant Photo ID Number or FEIN/EIN						
15. ID Type	<input type="checkbox"/> U.S. Driver License/ID Card (issued by: _____)			<input type="checkbox"/> NATO ID	<input type="checkbox"/> U.S. Dept. of State ID	<input type="checkbox"/> Passport (issued by: _____)	<input type="checkbox"/> U.S. Military ID	<input type="checkbox"/> U.S. Dept. of Homeland Security ID	<input type="checkbox"/> U.S. Citizenship & Immigration Services/DOJ ID	<input type="checkbox"/> Other Military Status of Forces Photo ID		
16. Applicant First Name (or Entity Name)			Middle Name		Last Name			Suffix (if any)				
17. Additional Applicant First Name (if applicable)			Middle Name		Last Name			Suffix (if any)				
18. Applicant Mailing Address			City		State			Zip	19. Applicant County of Residence			
20. Previous Owner Name (or Entity Name) Southwest Gooseneck, LTD San Antonio			City TX		State	21. Dealer GDN (if applicable) P4098X		22. Unit No. (if applicable)				
23. Renewal Recipient First Name (or Entity Name) (if different)			Middle Name		Last Name			Suffix (if any)				
24. Renewal Notice Mailing Address (if different)			City		State			Zip				
25. Applicant Phone Number (optional)		26. Email (optional)			27. Registration Renewal eReminder <input type="checkbox"/> Yes (Provide Email in #26)			28. Communication Impediment? <input type="checkbox"/> Yes (Attach Form VTR-216)				
29. Vehicle Location Address (if different)			City		State			Zip				
30. Multiple (Additional) Liens <input type="checkbox"/> Yes (Attach Form VTR-267)		31. Electronic Title Request <input type="checkbox"/> Yes (Cannot check #30)		32. Certified/eTitle Lienholder ID Number (if any)				33. First Lien Date (if any)				
34. First Lienholder Name (if any)			Mailing Address			City		State		Zip		
35. Check only if applicable:						MOTOR VEHICLE TAX STATEMENT						
<input type="checkbox"/> I hold Motor Vehicle Retailer (Rental) Permit No. _____ and will satisfy the minimum tax liability (V.A.T.S., Tax Code §152.046(c)						<input type="checkbox"/> I am a dealer or lessor and qualify to take the Fair Market Value Deduction (V.A.T.S., Tax Code, §152.002(c)). GDN or Lessor Number _____						
36. Trade-In (if any) <input type="checkbox"/> Yes (Complete)		Year	Make	Vehicle Identification Number			37. Additional Trade-In(s) <input type="checkbox"/> Yes					
38. Check only if applicable:						SALES AND USE TAX COMPUTATION						
<input type="checkbox"/> (a) Sales Price (\$ _____ rebate has been deducted)		\$ _____	<input type="checkbox"/> \$90 New Resident Tax – (Previous State) _____	<input type="checkbox"/> (b) Less Trade-in Amount, described in Box 36 above	\$ (_____)	<input type="checkbox"/> \$5 Even Trade Tax	<input type="checkbox"/> (c) For Dealers/Lessors/Rental ONLY – Fair Market Value Deduction, described in Box 36 above	\$ (_____)	<input type="checkbox"/> \$10 Gift Tax – Attach Comptroller Form 14-317	<input type="checkbox"/> \$65 Rebuilt Salvage Fee		
(d) Taxable Amount (Item a minus Item b or Item c)		\$ _____	<input type="checkbox"/> 2.5% Emissions Fee (Diesel Vehicles 1996 and Older > 14,000 lbs.) _____	(e) 6.25% Tax on Taxable Amount (Multiply Item d by .0625)		\$ _____	<input type="checkbox"/> 1 % Emissions Fee (Diesel Vehicles 1997 and Newer > 14,000 lbs.) _____	<input type="checkbox"/> Exemption claimed under the Motor Vehicle Sales and Use Tax Law because:		_____		
(f) Late Tax Payment Penalty <input type="checkbox"/> 5% or <input type="checkbox"/> 10%		\$ _____	<input type="checkbox"/> \$28 or \$33 Application Fee for Texas Title	(g) Tax Paid to _____ (STATE)		\$ _____	(Contact your county tax assessor-collector for the correct fee.)					
(h) AMOUNT OF TAX AND PENALTY DUE (Item e plus Item f minus Item g)		\$ _____										
CERTIFICATION – State law makes falsifying information a third degree felony												
I hereby certify all statements in this document are true and correct to the best of my knowledge and belief, and I am eligible for title and/or registration (as applicable).												
_____ Signature(s) of Seller(s), Donor(s), or Trader(s)				_____ Printed Name(s) (Same as Signature(s))				_____ Date				
_____ Signature of Applicant/Owner				_____ Printed Name (Same as Signature)				_____ Date				
_____ Signature(s) of Additional Applicant(s)/Owner(s)				_____ Printed Name(s) (Same as Signature(s))				_____ Date				