



West Virginia Department of Transportation Division of Motor Vehicles Application for Certificate of Title

FOR DMV USE ONLY

CLASS _____	EXP. DATE _____
PLATE NUMBER _____	
DL OR ID NUMBER _____	

TYPE OR PRINT IN BLUE OR BLACK INK

MAKE CHECKS PAYABLE TO THE DIVISION OF MOTOR VEHICLES.
INSTRUCTIONS ARE ON THE REVERSE SIDE OF THIS FORM.

FOR DMV USE ONLY

DEPT. NUMBER _____
UNIT NUMBER _____

The buyer(s)/owner(s) of the following motor vehicle make application for this motor vehicles Certificate of Title and hereby state the following:

NAME(S) _____

MAILING ADDRESS

Number	Street	City or Town	County	State	Zip Code
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VEHICLE DESCRIPTION

MAKE _____ YEAR _____ V.I.N. _____

STYLE OF BODY	WEIGHT	Passenger Vehicle Only	TRUCKS Requested (GVW)
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ODOMETER READING (No Tenths) _____

Title Brands: RECONSTRUCTED OTHER: _____

PURCHASE PRICE \$ _____ TRADE IN \$ _____ NET COST \$ _____ 6% SALES TAX _____

(Credit allowed only on vehicles titled in West Virginia and the tax paid thereon by applicant)

TRADE-IN DESCRIPTION

1) Make _____ Year _____ VIN/Serial No. _____ West Virginia Title Number _____

2) Make _____ Year _____ VIN/Serial No. _____ West Virginia Title Number _____

REGISTRATION PLATE TRANSFERRED FROM (Send copy of registration card both sides)

Make of Vehicle	Weight	VIN/Serial Number	Title Number	License Plate Number
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LIENS AND ENCUMBRANCES

1	NAME _____	AMOUNT _____	LENDER CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MAILING ADDRESS _____	KIND OF LIEN _____	DATE _____	C/S/C	D/T	S/A					

2	NAME _____	AMOUNT _____	LENDER CODE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	MAILING ADDRESS _____	KIND OF LIEN _____	DATE _____	C/S/C	D/T	S/A					

I hereby state that there is a motor vehicle liability policy in effect on the described vehicle in accordance with the provisions of the West Virginia Motor Vehicle Laws and certify that the statements made are true and correct to the best of my knowledge and belief under penalty of false swearing. West Virginia Motor Vehicle Law § 17A-9-1: Fraudulent Applications.

NAME OF INSURANCE COMPANY _____

NAME OF INSURANCE AGENT _____

INSURANCE POLICY NUMBER _____

NATIONAL ASSOCIATION INSURANCE COMMISSIONERS (NAIC) NUMBER _____

THIS TITLE APPLICATION MUST BE SIGNED BY THE PURCHASER(S)/OWNER(S)

If the title reads "AND" Both Signatures of Owners Must Appear

(X)

(X)

** INSURANCE MUST BE IN EFFECT WHEN THIS APPLICATION IS RECEIVED

DEALER CERTIFICATION

This is to certify that the above described vehicle was acquired from _____ on month _____ day _____ year _____ and sold to the above named purchaser on month _____ day _____ year _____ . The undersigned dealer further certifies that the sale price, trade-in, and net cost are true and accurate and that the Federal Odometer Regulation has been satisfied. Federal regulations require that you state the odometer mileage upon transfer of ownership.

I certify to the best of my knowledge that the odometer reading is _____ and reflects the actual mileage of the vehicle unless one of the following statements is checked: _____ Mileage stated is in excess of its mechanical limits (or) _____ The odometer reading is not the actual mileage - WARNING-ODOMETER DISCREPANCY

DEALER NAME _____

ADDRESS _____

SIGNATURE (X) _____

DEALER LICENSE NO. _____

FOR DMV USE ONLY

TITLE NUMBER

Instructions

- Type or complete this application in **BLUE OR BLACK INK ONLY**.
- **DO NOT SEND CASH. SEND CHECK OR MONEY ORDER** payable to the Division of Motor Vehicles. Any check that is not honored for payment will result in a **\$10.00 SERVICE CHARGE**.
- If the vehicle was previously titled in another state, the title must accompany this application.
- If there is a lien, make sure the complete address and zip code are included.
- If you wish to purchase a new plate, include the appropriate fees detailed below.
- A statement of insurance must be submitted with each application for motor vehicle registration.
- Credit on trade-in allowed only for vehicles titled in West Virginia and taxes paid thereon by applicant.

Table of Fees

Type of Fee	Fee Information	Fee Totals
Title Fee (This fee is required)	\$15.00	\$15.00
Lien Fee - If applicable (\$10.00 Per Lien)		
License Plate Transfer Fee - If applicable	\$10.50	
6% Sales Tax (All sales under \$500.00 must pay \$30.00 instead of 6%)	X .06 =	
Fee for Registration and License Plate - If applicable <input type="checkbox"/> Class A - Cars & Trucks up to 10,000 lbs. <input type="checkbox"/> Class M - Mobile Equipment <input type="checkbox"/> Class B - Trucks 10,001 lbs. and up <input type="checkbox"/> Class R - Travel Trailers <input type="checkbox"/> Class G - Motorcycles <input type="checkbox"/> Class T - Trailers <input type="checkbox"/> Class H - Buses <input type="checkbox"/> Class V - Antique Vehicles <input type="checkbox"/> Class J - Taxi Cabs	SEE THE "MOTOR VEHICLE REGISTRATION FEE" BROCHURE FOR A FEE SCHEDULE. dmv.wv.gov/manuals	
TOTAL PAYMENT REQUIRED (Send a check or money order ONLY if mailing this application) =		

Checklist

- Is the application completed, including signatures?
- Did you enclose a check or money order payable to DMV for the total fees and payment due?
- Do you have all required documents such as:
 - Proof of insurance (Certificate of Insurance WV-1) or a completed statement of insurance
 - Copy of the registration card front and back if you are transferring a license plate
 - Out-of-State title if the vehicle was previously titled in another state

MAIL ALL REQUIRED DOCUMENTS, FORMS, AND PAYMENT TO:

Division of Motor Vehicles
5707 MacCorkle Avenue, SE, PO Box 17710
Charleston, WV 25317

Toll Free Telephone (In-state only) 1-800-642-9066
Out of State (304) 558-3900