

DOR-MVD Title/Tag Application

Original Title Fee \$ 18.00
 Replacement Title Fee 8.00
 Title Penalty Fee 10.00
 License Plate to Transfer _____
 (Attach copy of current registration.)
 GA Sales Tax \$ _____
 Expedited Title Fee* \$ 10.00

*Expedited title processing is only available
 by mail or in person at State MVD.

County Ad Valorem Tax \$ _____ .00
 License Tag Fee \$ _____ .00
 Mfg. Fee Special Tag \$ _____ .00
 Special Tag Annual Fee \$ _____ .00
 Tag Transfer Fee \$ _____ .00
 10% Tax Penalty (\$5 Min.) \$ _____ .00
 25% Tag Penalty \$ _____ .00
 Tag/Decal Mail Fee \$ _____ .00

Vehicle Section: Except for the signature, this application must be typed, electronically completed & printed or legibly hand printed in black or blue ink.

Vehicle Identification Number	Year	Make	Body Style	Model	Color	Cylinders	New or Used
Date Purchased	Emission Certificate #	Current Title #	Current Title's State of Issue		GA County of Residence	District #	
Odometer Reading - No tenths	Odometer reading is actual miles unless you check one of the following boxes: <input type="checkbox"/> EXEMPT <input type="checkbox"/> Exceeds Mechanical Limits of Odometer <input type="checkbox"/> <u>Not</u> the Actual Mileage, Warning odometer discrepancy						Fuel

Complete For All Trucks Over 14,000 Gross Vehicle Weight

Gross Vehicle Weight & Load	Straight Truck?	Used For Hire?	Type of Trailer Pulled?	Product Hauled?	Is This A Farm Vehicle?
<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No			<input type="checkbox"/> Yes <input type="checkbox"/> No

Number of Owners _____ **Owner Section** **Leased Vehicle?** No Yes (Complete Lessee Section)

Owner # 1		Full Legal Name of Owner #1				Date of Birth
Driver's License # (If individual)	State/Country of Issue*	First,	Middle,	Last	Suffix	
If you purchased this vehicle from an out-of-state dealer/business, did you pick-up the vehicle out-of-state? <input type="checkbox"/> Yes <input type="checkbox"/> No		Full Legal Name of Business/Leasing Company's Name				Purchaser's GA Sales Tax # (when applicable)

Owner # 2		Full Legal Name of Owner #2				Date of Birth
Driver's License # (If an individual)	State/Country of Issue*	First,	Middle,	Last	Suffix	
		Full Legal Name of Business/Leasing Company's Name				

Address (Street address including city, state & zip)	Mailing Address (If different from street address including city, state & zip)
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Seller Section		Lessee Section	
GA Dealer's/Bank's 12 Digit Customer ID#	Seller's GA Sales Tax #	Driver's License # & State/Country of Issue, if individual*	
Full Legal Name or Business Name & Address:		Lessee's Full Legal Name & Address or Business Lessee's Full Name & Address:	
If Georgia Seller, GA County Name		Lessee's GA County Location	

Number of Security Interests or Liens: _____ **Security Interests or Liens Section**

Security Interest Holder's/Lien Holder's 12 Digit Customer ID #	Security Interest Holder's/Lien Holder's 12 digit Customer ID #
Name & Address of 1 st Security Interest Holder/Lien Holder:	Name & Address of 2 nd Security Interest Holder/Lien Holder:
Security Interest Holder's/Lien Holder's 12 digit Customer ID #	Name & Mailing Address of Attorney-in-Fact - Attach original power of attorney if title is to be mailed to attorney-in-fact.
Name & Address of 3 rd Security Interest Holder/Lien Holder:	

I do solemnly swear or affirm under criminal penalty of a felony for fraudulent use of a false or fictitious name or address or for making a material false statement punishable by fine up to \$5000 or by imprisonment of up to five (5) years, or both, that the statements contained herein are true & accurate.

Owner #1 Signature _____ Owner #2 Signature _____
 *If you have an out-of-state/country driver's license, attach a copy & submit proof of Georgia residency, e.g. copy of voter registration card, lease agreement, utility bill, etc.