

APPLICATION FOR TEXAS CERTIFICATE OF TITLE

→ **SHADED AREAS ARE TO BE COMPLETED BY THE SELLER** ←

→ **TYPE OR PRINT NEATLY IN INK** ←

TAX OFFICE USE ONLY					County Use Only	
Tax Collector _____		County _____				
Date _____		Transaction Number _____				
1. Vehicle Identification Number _____		2. Year _____	3. Make _____	4. Body Style _____		<input type="checkbox"/> SPV \$ _____ <input type="checkbox"/> Appraisal Value \$ _____
5. Model _____	6. Odometer Reading _____	7. Empty Weight _____	8. Carrying Capacity (lbs.) _____	9. Tonnage _____		
10. Trailer Type <input type="checkbox"/> Semi <input type="checkbox"/> Full	11. Plate No. _____	12. Vehicle Unit No. _____				13. Applicant's/Additional Applicant's Social Security Numbers (See * below) or Federal Tax ID Number _____ _____ _____ <input type="checkbox"/> Statement of Fact for Non-Disclosure, VTR-171, Attached.
14. Applicant's/Owner's Name(s) Address _____ City, State, Zip Code _____ County Name _____						
14a. Registrant's Name (Renewal Notice Recipient) Address _____ City, State, Zip Code _____ County Name _____						
14b. Vehicle Physical Location City, State, Zip Code _____						

15. Previous Owner's Name Address _____ City, State, Zip Code _____	15a. GDN – Dealer Use Only
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THIS MOTOR VEHICLE IS SUBJECT TO THE FOLLOWING FIRST LIEN

16. 1st Lien Date _____	1st Lienholder Name _____ Address _____ City, State, Zip Code _____	16a. Additional Lien(s)? <input type="checkbox"/> YES (If additional liens are to be recorded, attach Form VTR-267.)
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17. FOR CORRECTED TITLE, CHECK REASON(S)	<input type="checkbox"/> Change in Vehicle Description <input type="checkbox"/> VIN <input type="checkbox"/> No Change in Ownership <input type="checkbox"/> Add Lien <input type="checkbox"/> Remove Lien <input type="checkbox"/> Odometer Brand <input type="checkbox"/> Odometer Reading <input type="checkbox"/> Year <input type="checkbox"/> Make <input type="checkbox"/> Body Style <input type="checkbox"/> Other
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18. ODOMETER DISCLOSURE - FEDERAL AND STATE LAW REQUIRES THAT YOU STATE THE MILEAGE UPON TRANSFER OF OWNERSHIP. FAILURE TO COMPLETE OR PROVIDING A FALSE STATEMENT MAY RESULT IN FINES AND/OR IMPRISONMENT.	
I, _____, state that the odometer now reads _____ (no tenths). ** (Name of Seller/Agent)	
THE MILEAGE SHOWN IS: <input type="checkbox"/> A -- Actual Mileage <input type="checkbox"/> N -- Not Actual Mileage WARNING -- ODOMETER DISCREPANCY <input type="checkbox"/> X -- Mileage Exceeds Mechanical Limits	
** IF NO SELLER/AGENT, TITLE APPLICANT SHOULD CHECK ONE OF THE 3 BOXES ABOVE UNLESS NUMBER 6 INDICATES "EXEMPT."	

MOTOR VEHICLE TAX STATEMENT

19. CHECK ONLY IF APPLICABLE <input type="checkbox"/> I hold Motor Vehicle Retailer's (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]).			
20. DESCRIPTION OF VEHICLE TRADED IN (if any)	Year _____	Make _____	Vehicle Identification Number _____
			20a. ADDITIONAL TRADE – INS? (Y/N)

21. SALES AND USE TAX COMPUTATION			
<input type="checkbox"/> (a) Sales Price (\$ _____ rebate has been deducted) \$ _____		<input type="checkbox"/> \$90 New Resident Tax - (Previous State) _____	
(b) Less Trade - In Amount, Describe in Item 20 Above \$ (_____)		<input type="checkbox"/> \$5 Even Trade Tax	
(c) For Dealers/Lessors/Rental ONLY -- Fair Market Value Deduction, Describe in Item 20 Above \$ (_____)		<input type="checkbox"/> \$10 Gift Tax	
(d) Taxable Amount (Item a. minus Item b./Item c.) \$ _____		<input type="checkbox"/> \$65 Rebuilt Salvage Fee	
(e) 6.25% Tax on Taxable Amount (Multiply Item d. by .0625) \$ _____		<input type="checkbox"/> 2.5% Emissions Fee (Diesel Vehicles 1996 and Older > 14,000 lbs) _____	
(f) Late Tax Payment Penalty <input type="checkbox"/> 5% or <input type="checkbox"/> 10% \$ _____		<input type="checkbox"/> 1% Emissions Fee (Diesel Vehicles 1997 and Newer > 14,000 lbs) _____	
(g) Tax Paid to _____ (STATE) \$ _____		<input type="checkbox"/> Exemption claimed under the Motor Vehicle Sales and Use Tax Law because _____	
(h) AMOUNT OF TAX AND PENALTY DUE (Item e. plus Item f. minus Item g.) \$ _____		<input type="checkbox"/> \$28 or \$33 APPLICATION FEE FOR CERTIFICATE OF TITLE (Contact your County Tax Assessor-Collector for the correct fee.)	

I HEREBY CERTIFY THAT ALL STATEMENTS IN THIS DOCUMENT ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

22. _____ Signature of SELLER, DONOR, OR TRADER	_____ PRINTED NAME (Same as signature)	_____ Date
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23. _____ Signature of PURCHASER, DONEE, OR TRADER	_____ PRINTED NAME (Same as signature)	_____ Date
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RIGHTS OF SURVIVORSHIP OWNERSHIP AGREEMENT (MARRIED PERSONS) WE, THE PERSONS WHOSE SIGNATURES APPEAR HEREIN, HEREBY AGREE THAT THE OWNERSHIP OF THE VEHICLE DESCRIBED ON THIS APPLICATION FOR TITLE, SHALL FROM THIS DAY FORWARD BE HELD JOINTLY, AND IN THE EVENT OF DEATH OF EITHER OF THE PERSONS NAMED IN THE AGREEMENT, THE OWNERSHIP OF THE VEHICLE SHALL VEST IN THE SURVIVOR.	
_____ SIGNATURE	_____ Date
NON-MARRIED PERSONS ARE REQUIRED TO EXECUTE A RIGHTS OF SURVIVORSHIP OWNERSHIP AGREEMENT FOR A MOTOR VEHICLE, FORM VTR-122.	
_____ SIGNATURE	_____ Date

WARNING: Transportation Code, §501.155, provides that falsifying information on title transfer documents is a third-degree felony offense punishable by not more than ten (10) years in prison or not more than one (1) year in a community correctional facility. In addition to imprisonment, a fine of up to \$10,000 may also be imposed.

*** NOTE:** Transportation Code, §501.0235, REQUIRES that the applicant's social security number be provided when applying for a certificate of title. If the applicant does not have a social security Number, Form VTR-171, Statement of Fact for Non-disclosure of a Social Security Number, must accompany this application. This information is requested for owner identification purposes.