Michigan Department of State Application for Title and Registration Statement of Vehicle Sale

Purchase Date _____ Stock Number _____

Delivery Date _____ Base MSRP _____

For Department Use Only

Dealer:

Street Address:

City:

County: State: **MI** ZIP Code:

Dealer License Number Sales Tax License Number Phone Number

Vehicle Sold: ☐ New ☐ Used ☐ Demo

Trade-In ☐ Yes ☐ No

Trade-In Year | Trade-In Make | Vehicle Identification Number (VIN)

Vehicle Registration to Transfer Plate

Expires 15 Days After Delivery Date

Plate Transferred From: Year Make

Vehicle Identification Number (VIN): | Plate Number: | Temp. Expiration Date:

Vehicle History and Title Brand Disclosure

☐ Police Vehicle
☐ Municipal Vehicle
☐ Taxi
☐ Vehicle Has Been Flood Damaged
☐ Salvage Title Was Previously Issued
☐ _____

Odometer Mileage Disclosure

The odometer mileage reading must match the mileage reading disclosed to the purchaser on the title or mileage statement.

☐☐☐☐☐☐ **No Tenths**

☐ Actual Mileage ☐ Exempt
☐ Not Actual Mileage

Dealer Installed Accessories When Optional to Purchaser:

I have selected and agree to pay the OPTIONAL $24 CVR electronic filing fee _____ Customer Initials

Remarks:

Recreation Passport? ☐ Yes ☐ No Purchaser or Lessee's Initials: _____

I certify this vehicle was delivered to the named purchaser or lessee on the delivery date indicated above, all information on this form is accurate and the vehicle is subject only to the secured interest listed on this form. I certify the dealership will apply for title and registration in the purchaser's name within 15 days of the delivery date.

X _____ Signature of Dealer's Agent _____ Title

_____ Printed Name of Dealer's Agent

Plate Number	Plate Expiration Date: Month	Day	Year 2021	Months	☐ New Plate ☐ Renewal ☐ Transfer
Year	Make	Body Style Motorcycle		Plate Code 02	County Code
Vehicle Identification Number (VIN)		Fee Category or Weight		License Plate Fee	
Driver's License or PID Number of All Owners or Lessees 1) 3) 2)		County of Residence		Title Fee / Title Late Fee	
Complete Names and Address of All Owners or Lessor				Sales Tax / Plate Transfer Fee	
Complete Names and Address of All Lessees				Total - Transfer to Line 5 / Full Rights to Survivor ☐ Yes ☐ No	
Michigan No-Fault Insurance Company				Policy or Binder Number	
Secured Interest: / Street Address: / City, State, ZIP:				Lien Filing Date: / ELT UID: / Mail Title Upon Lien Release ☐	

1. Purchase Price of Vehicle *(Including Freight & Accessories)* .....
2. Other Taxable Charges (*Documentary, Service, Temp. Reg. Fees, etc.*)
2a. Optional Electronic $24 Filing Fee.....
3. Trade-in Sales Tax Credit .....
4. Total Taxable Price (*Line 1 + Line 2 + Line 2a - Line 3*) .....
5. **Sales Tax + Plate Fee + Title Fee** *(From Total Above)* .....
6. Non-Taxable Charges *(Labor, Service Contract, etc.)*.....
7. Total Delivered Price *(Line 1 + Line 2 + Line 2a + Line 5 + Line 6)*
8. Cash on Deposit.....
9. Cash Due on Delivery.....
10. Trade-In ..... $
11. Minus Lien ..... $
12. Total Down Payment.....
13. Unpaid Balance To Be Financed .....
14. Insurance Premium Charge* .....
15. Total Amount Of Finance Contract .....

***Warning: This Insurance is not PL/PD No-Fault Insurance required by Michigan law.**

☐ Credit Life Insurance ☐ Health & Accident Insurance
☐ Gap or Waiver ☐ _____

15-Day Temporary Registration Number

Printed Name of Person Issuing Temporary Registration

Temporary Fee Charged ☐ Yes ☐ No

Purchaser Warning: Do Not Sign a Blank Form

I am purchasing or leasing this vehicle and am applying for a Michigan certificate of title and registration or, if the lessee, applying for a registration. I certify that my driver's license is not suspended, revoked, or denied as a repeat offender and I am eligible to purchase or register this vehicle. I further certify that if a tax exemption is shown above it is valid.

X _____ Purchaser or Lessor's Signature _____ Date X _____ Co-Purchaser's Signature _____ Date X _____ Co-Purchaser's Signature _____ Date

X _____ Lessee's Signature _____ Date X _____ Co-Lessee's Signature _____ Date X _____ Co-Lessee's Signature _____ Date

Purchasers Note: If vehicle title is not received within 30 days, contact the Department of State Information Center at 888-767-6424.