

Georgia Motor Vehicle Division Title Application

Vehicle Section: Applications (except signatures) must be typed, printed legibly in black or blue ink or electronically completed and printed.

Vehicle Identification Number	Year	Make	Body Style	Model	Color	Cylinders	New or Used
-------------------------------	------	------	------------	-------	-------	-----------	-------------

Fuel	Date Purchased	Current Title #	Current Title State of Issue	GA County of Residence
------	----------------	-----------------	------------------------------	------------------------

Odometer Reading	Odometer Reading is Actual Miles Unless One of the Following is Checked <input type="checkbox"/> Exceeds Mechanical Limits of Odometer <input type="checkbox"/> Not the Actual Mileage, Warning Odometer Discrepancy	<input type="checkbox"/> EXEMPT	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
------------------	---	---------------------------------	--

Complete For All Commercial Vehicles					
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? <input type="checkbox"/> No <input type="checkbox"/> 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 <u>OR</u> Business or Leasing Co Name	Purchaser's GA Sales Tax # (when applicable)

Owner # 2		Full Legal Name of Owner #2				Date of Birth
Driver's License# (If Individual)	State/Country of Issue	First,	Middle,	Last,	Suffix <u>OR</u> Business or Leasing Co Name	

Address (Street Address Including City, State & Zip)	Mailing Address, if different from street address - Include City, State & Zip
--	---

Seller Section		Lessee Section	
Georgia Dealer's or Bank's 12 Digit Customer ID #	Seller's Georgia Sales Tax #	Driver's License # (if Individual)*	
Name and Address:		Lessee's Full Legal Name and Address (Individual or Business)	
Seller's County Location, if GA Seller		Lessee's County Location	

Number of Security Interest or Liens: _____	Security Interests or Liens Section
--	--

If you are an ELT (Electronic Lien Title) Participant, please check the following box(es): **1st lien** **2nd lien** **3rd lien**

Security Interest/Lien Holder or ELT 12 Digit MVD Assigned Customer #	Security Interest/Lien Holder or ELT 12 Digit MVD Assigned Customer #
Name and Address of 1st Security Interest/Lien Holder:	Name and Address of 2nd Security Interest/Lien Holder:

Security Interest/Lien Holder or ELT 12 Digit MVD Assigned Customer #	Name and Mailing Address of Power of Attorney (POA) Attach original POA if Title to be mailed to POA:
Name and Address of 3rd Security Interest/Lien Holder:	

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

Owner #1 Signature _____ Owner #2 Signature _____

***A Georgia license plate and registration will not be issued until the applicant presents, at the time of application, their valid Georgia driver's license or Georgia identification card.**