

Department of Motor Vehicles Agency of Transportation

120 State Street Montpelier, Vermont 05603 802.828.2000

	802.828.2000
dn	v.vermont.gov

Owner	Name			License #			Date of birth		Gender			
	Address where you get mail				Address where you live							
	City		State ZIP			City			State		ZIP	
	If name has changed, list previous name(s):											
	phone					email						
	Name				License # SSN/FIN							
cturer	Address where you get Mail					Address where you live						
Manufacturer	City	S	State	ZIP		City			State		ZIP	
	Date Manufactured	lanufactured		Phone		email						
Make Model Ye			Iodel Year	Body	Туре	G	Gross Weight (If True	If Truck) Unladen Weight (If Truck)				
Vehicle/Vessel Serial Number (VIN)						Engine Serial Number (VIN)						
Engine Size (If Motorcycle) Length (If boat)					onstruction Material (If Boat) l Wood □ Steel □ Aluminum □ Fiberglass □ Other:							
NOTE: The manufacturer may be the owner, a corporation or a third party. Said manufacturer shall provide the applicant with applicable invoices or sales slips identifying where the parts came from that were used to build the vehicle/vessel/snowmobile.												
I (the manufacturer) certify that the vehicle/vessel/snowmobile was assembled from parts owned by said manufacturer. I also certify that the statements made herein are true, correct and complete to the best of my knowledge. These statements are made under penalties of perjury and 23 V.S.A. §202, §3829 and §3830.												
Signature of Owner or Authorized Agent Date											e	