

Vehicle Title Application

Vehicle – Please type or print plainly

For title purposes only

Vehicle identification no (VIN)			Condition <input type="checkbox"/> New <input type="checkbox"/> Used		Vehicle type		Primary use type		Fuel type		
Model year	Make		Model			Trim	Body style		Motorcycle style		
GV Weight Rating		Scale wt	Gross weight	Mo GWT	Seats	Color #1		Color #2		Equip no	Purchase price
Wheels	Rental no	Fleet	Engine (MC)	Motor home/Cycle/WATV eng serial no			Length	Width	Quick title <input type="checkbox"/> Yes <input type="checkbox"/> No	Discover pass <input type="checkbox"/> Yes <input type="checkbox"/> No	Park donation <input type="checkbox"/> Yes <input type="checkbox"/> No

Registered owner – For additional owners, attach sheet with name, driver license/ID/TIN/EIN/UBI number, expiration date, and phone information. Washington primary residence street address or Washington principal place of business street address is required on the vehicle record. For exceptions, see [Primary Residence Address Exception](#), form 420-004.

1	Owner type	ID type	Driver license/ID/TIN/EIN/UBI no		Expiration date	Phone type	(Area code) Phone no		
	Registered owner name (<i>Last, First, Middle, Suffix</i>) or Business name								
	Washington primary residence address (<i>if an individual</i>) or Washington principal place of business address (<i>if a business</i>)								
	Mailing address, if different than residence address (<i>Street address or PO Box, City, State, ZIP code</i>) or exception address								
	One-time mailing address, if applicable								
Paperless renewal option <input type="checkbox"/> Notify me by email when it's time to renew my vehicle					Email address				
2	Owner type	Joint tenants w/right of survivorship <input type="checkbox"/> Yes <input type="checkbox"/> No		ID type	Driver license/ID/TIN/EIN/UBI no		Expiration date		
	Registered owner name (<i>Last, First, Middle, Suffix</i>) or Business name						Phone type	(Area code) Phone no	

Legal owner/Lienholder – Fill out if different than registered owner. For additional legal owner/lienholders, attach sheet with name, driver license/ID/TIN/EIN/UBI number, expiration date, and address information.

Name of legal owner/lienholder (<i>Last, First, Middle initial or Business name</i>)					
Legal owner/Lienholder type	ID type	Driver license/ID/TIN/EIN/UBI no		Expiration date	ELT participant <input type="checkbox"/> Yes <input type="checkbox"/> No
Mailing address (<i>Street address or PO Box, City, State, ZIP code</i>)					

Dealer

Dealer type	Dealer no	Dealer name		Sale date	Delivery date	Vehicle status <input type="checkbox"/> New <input type="checkbox"/> Used <input type="checkbox"/> Prev titled	
I certify that this information is correct. The vehicle is clear of encumbrances except as shown. Any required sales tax has been collected.					Dealer authorized signature X		

Anyone who knowingly makes a false statement may be guilty of a felony under state law and upon conviction shall be punished by a fine, imprisonment, or both. I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

X	Signature of registered owner		Title, if signing for business		X	Signature of registered owner		Title, if signing for business	
Date and place signed					Date and place signed				

Notarization/Certification – You don't need your signature notarized if you sign in front of a vehicle licensing agent, who can certify your signature.									
State of _____ County of _____									
Signed or attested before me on _____ by _____					Name of person signing this document				
(Seal or stamp)					Notary/Agent/Subagent signature				
					Notary printed or stamped name				
Title _____ and _____					Dealer or county/office number or notary expiration date				