



REVENUE DIVISION

VEHICLE REGISTRATION APPLICATION

TRANSACTION TYPE

STATE OF ARKANSAS
DEPARTMENT OF FINANCE & ADMINISTRATION
PO BOX 1272
LITTLE ROCK, AR 72203

LICENSE NO. INV. TYPE USE CODE DECAL NO. EXPIRATION DATE VEHICLE IDENTIFICATION NUMBER

YEAR MAKE MODEL BODY CYL COLOR FUEL UNLADEN WT. GROSS WT. DSP AXLES PREVIOUS TITLE NUMBER

TITLE CODE PUR. TYPE PUR. DATE DEALER # OD CODE OD READING CHECK IF APPLICABLE DAMAGE PREV. DAMAGE LEASE PRORATE PENALTY MAIL

COMPLETE ONLY IF CONVERTING CLASS TWO (2) THROUGH EIGHT (8) TRUCK LICENSE
OLD LIC. NO. OLD WT. OLD FEE IF INVOLUNTARY, SHOW AMT. OVERLOAD AND SUMMONS NUMBER VALIDATION PERIOD FOR DRIVE OUT OR INTRANSIT
BEGINNING DATE & TIME: ENDING DATE & TIME

OWNER NAME
LAST FIRST REL
LAST FIRST
COMPANY

ARKANSAS ADDRESS CTY CODE

TITLE MAILING ADDRESS CTY CODE

RENEWAL MAILING ADDRESS CTY CODE

FIRST LIENHOLDER CONTRACT DATE REGISTRATION FEE REPLACEMENT FEE
CREDIT TRANSFER FEE
ADDITIONAL FEE TITLE FEE
SECOND LIENHOLDER CONTRACT DATE
PRORATED FEE LIEN FEE
SPECIAL FEE (1) PENALTY
SPECIAL FEE (2) POSTAGE

REVENUE OFFICE CITY OFFICE NUMBER COUNTY SPECIAL FEE (3) TOTAL REG. FEES

ARKANSAS REVENUE AGENT DATE CTY CODE SALES TAX RECEIPT NUMBER

SIGNATURE OF LIENHOLDER (IF APPLICABLE)

SIGNATURE OF OWNER(S) PERSONAL PROPERTY ACCT. NO.