

VBS VEHICLE REGISTRATION FORM

State of Registration: _____ Registration Number: _____

Owner Information:

Full Legal Name: _____

Government Issued ID Number: _____

Date of Birth: _____ Phone Number: _____

Residential Address: _____

Vehicle Information:

Make: _____ Model: _____

Year: _____ Vehicle Identification Number (VIN): _____

License Plate Number: _____

Lien Information (if any):

Lienholder Name: _____

Lien Amount: _____ USD

Lien Release Date: _____

Declaration and Authorization:

I hereby declare that the information provided above is true and accurate to the best of my knowledge. I authorize the relevant state authorities to process this registration application and to release any information related to this vehicle registration as required by law. I understand that providing false information is subject to penalties under applicable United States laws.

Signature and Acknowledgment:

Owner's Signature: _____ Date: _____

Notary Public (if required):

Name: _____

Signature: _____ Date: _____

Terms and Conditions:

1. The registrant agrees to comply with all applicable federal, state, and local laws governing vehicle registration.
2. The vehicle is registered for lawful use only, and any changes to ownership or status must be reported promptly.
3. The Department of Motor Vehicles reserves the right to revoke or suspend registration upon violation of any terms.
4. This registration is non-transferable and void if altered or duplicated unlawfully.
5. The registrant consents to inspections and verifications as required by the Department.
6. All fees associated with registration are non-refundable.
7. This form and registration are legally binding under the jurisdiction of the applicable United States state laws.

OWNER'S SIGNATURE

NOTARY PUBLIC SIGNATURE

Signature: _____

Signature: _____

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