



STATE OF MICHIGAN

**APPLICATION FOR MICHIGAN TITLE & REGISTRATION
STATEMENT OF VEHICLE SALE**

DEPARTMENT OF STA

Purchase Date _____

Invoice/Stock No. _____

Delivery Date _____

Invoice/Stock No. _____

Dealer _____

Address _____

City _____

County _____ State **MICHIGAN** Zip Code _____

Dealer License _____ Sales Tax License _____ Phone Number _____

Vehicle Sold New Used Demo Trade-In Yes No

Trade-In Year _____ Make _____ Vehicle No. _____

**TEMPORARY VEHICLE REGISTRATION
USED TO TRANSFER PLATES
Expires 15 days after delivery date**

Plate transferred from: Year _____ Make _____

Vehicle No. _____ Plate No. _____ Temp. Expiration Date _____

VEHICLE USE AND HISTORY DISCLOSURE:

- POLICE VEHICLE VEHICLE HAS BEEN FLOOD-DAMAGED
- GOVERNMENT VEHICLE SALVAGE TITLE HAS PREVIOUSLY BEEN ISSUED
- TAXI

ODOMETER MILEAGE

The following section must be completed when odometer disclosure is required. The odometer mileage reading must match the mileage reading disclosed to the purchaser on the title and/or mileage statement.

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NO TENTHS

- actual mileage not actual mileage exceeds mechanical limits of odometer

Factory Installed Accessories Factory List Affixed To Vehicle

Dealer Installed Accessories
When Optional to Purchaser

REMARKS:

CONTRACTUAL DISCLOSURE STATEMENT FOR USED VEHICLES ONLY
"The information you see on the window form for this vehicle is part of this contract. Information on the window form overrides any contrary provisions in the contract of sale."

"I CERTIFY I SOLD THIS VEHICLE TO THE PURCHASER NAMED IN THIS FORM. I WARRANT THE TITLE TO THE VEHICLE AND CERTIFY THAT THE VEHICLE IS SUBJECT ONLY TO THE SECURITY INTERESTS NAMED ABOVE."

Dealer's Signature _____

Title _____

Expires On			Months	<input type="checkbox"/> NEW PLATE <input type="checkbox"/> RENEWAL <input type="checkbox"/> TRANSFER
Month	Day	Year		

Year	Make	Body Style	Code	County
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Vehicle No.	Fee Category/Weight	License Fee
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Driver License No./PIDs of All Owners or Lessees	Title
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1) _____ 3) _____	Title Late Fee
2) _____	County of Residence

Complete Names and Addresses of All Owners or Lessors	Tax
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Reg. Transfer Fee

Total - Transfer to #4

Complete Names and Addresses of All Lessees	Full Rights to Survive
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Yes <input type="checkbox"/>	No <input type="checkbox"/>
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Insurance Company	Policy No. or Binder No.
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First Secured Interest	Filing Date
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Address
City-State Zip

Second Secured Interest	Filing Date
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Address
City-State Zip

1. PURCHASE PRICE OF VEHICLE (Including Freight & Accessories)
2. OTHER TAXABLE CHARGES (Documentary Fee, Service Fee, Temp. Reg. Fee, Etc.)
3. TOTAL TAXABLE PRICE
4. (Above total) SALES TAX - LICENSE - TITLE
5. NON-TAXABLE CHARGES (Labor, Service Contract, Etc.)
6. TOTAL DELIVERED PRICE
7. CASH ON DEPOSIT
8. CASH DUE ON DELIVERY
9. TRADE-IN \$ _____
10. LESS LIEN \$ _____
11. TOTAL DOWN PAYMENT
12. UNPAID BALANCE TO BE FINANCED
13. INSURANCE CHARGE*
14. TOTAL AMOUNT OF FINANCE CONTRACT

*TYPE OF INSURANCE
WARNING: This insurance is not PL/PD No Fault Insurance required by Michigan Law.

- CREDIT LIFE HEALTH & ACCIDENT
- GAP INSURANCE

Temporary Registration No. _____ Temporary Fee Charged Yes No

Salesperson _____

PURCHASER WARNING: DO NOT SIGN BLANK FORM

I am purchasing or leasing this vehicle and am applying for a Michigan certificate of title and registration or, if the lessee, applying for a registration. I certify my driver license is not suspended, revoked or denied as a repeat offender and I am eligible to purchase or register this vehicle. I further certify that if a tax exemption is shown above it is valid.