

Title #: _____

APPLICATION

Registration # (IA #): _____

REGISTRATION

— Owner Information — The 1st applicant will be listed as the primary owner shown on the registration.

If a Business/Trust: Use Entity Name as Full Name, Date of Inception as Birth Date, and Tax ID Number/FEIN as SSN.

Required

Iowa Resident Nonresident

#1 Full Name: _____ Birth Date: _____

Address: _____ City/State/Zip Code: _____

DNR Number: _____ DL Number: _____ Social Security Number: _____
If sent electronically leave blank.

Gender: Male Female Height: _____ Weight: _____ Eye Color: _____

Phone: _____ Email: _____

Iowa Resident Nonresident

#2 Full Name: _____ DL Number: _____ Birth Date: _____

Address: _____ City/State/Zip Code: _____

Gender: Male Female Height: _____ Weight: _____ Eye Color: _____

Iowa Resident Nonresident

#3 Full Name: _____ DL Number: _____ Birth Date: _____

Address: _____ City/State/Zip Code: _____

Gender: Male Female Height: _____ Weight: _____ Eye Color: _____

All owners can be listed as And- requires all parties to sign upon sale, title or transfer
 Or- requires one party to sign upon sale, title or transfer

APPLICATION DATE: _____ COUNTY OF REGISTRATION: _____

IOWA APPLICATION FOR: 1 BOAT 2 ATV 3 SNOW 4 ORV 5 ORM

TYPE: 6 New Number/Registration 8 Duplicate 10 Renewal of Number 12 Transfer of Ownership 14 Other
7 Title 9 Duplicate Title 11 Bond 13 Lien 15 Subsequent Lien

BOAT Previous Title No (if any): _____ Registration No (if any): _____

Boat Name: _____ Port Name: _____

Make _____ Model _____ Homemade

State of Primary Operation: _____

Color _____ Model Year _____ Overall Length _____ Boat Width _____ HIN _____
_____ FT. _____ IN. _____ FT. _____ IN.

Primary Operation: 1 <input type="checkbox"/> Pleasure 2 <input type="checkbox"/> Dealer or Manufacturer Demonstration 3 <input type="checkbox"/> Rent or Lease 4 <input type="checkbox"/> Official 5 <input type="checkbox"/> Commercial Passenger Carrying 6 <input type="checkbox"/> Commercial Fishing 7 <input type="checkbox"/> Other Commercial Operation 8 <input type="checkbox"/> Charter Fishing	Vessel Type: 1 <input type="checkbox"/> Cabin Motorboat 2 <input type="checkbox"/> Paddlecraft/Canoe 3 <input type="checkbox"/> Personal Watercraft 4 <input type="checkbox"/> Houseboat 5 <input type="checkbox"/> Pontoon 6 <input type="checkbox"/> Rowboat 7 <input type="checkbox"/> Open Motorboat 8 <input type="checkbox"/> Sail Only 9 <input type="checkbox"/> Other: _____ 10 <input type="checkbox"/> Paddlecraft/Kayak 11 <input type="checkbox"/> Auxillary Sail 12 <input type="checkbox"/> Air Boat 13 <input type="checkbox"/> Inflatable Boat	Hull Material: 1 <input type="checkbox"/> Aluminum 2 <input type="checkbox"/> Fiberglass 3 <input type="checkbox"/> Wood 4 <input type="checkbox"/> Steel 5 <input type="checkbox"/> Plastic 6 <input type="checkbox"/> Other: _____ 7 <input type="checkbox"/> Rubber/Vinyl/ Canvas	Propulsion Type: 1 <input type="checkbox"/> Propeller 2 <input type="checkbox"/> Water Jet 3 <input type="checkbox"/> Sail 4 <input type="checkbox"/> Manual 5 <input type="checkbox"/> Air Thrust 6 <input type="checkbox"/> Other: _____	Engine Drive Type: 1 <input type="checkbox"/> Inboard 2 <input type="checkbox"/> Outboard 3 <input type="checkbox"/> Pod Drive 4 <input type="checkbox"/> Sterndrive 5 <input type="checkbox"/> Other: _____ 6 <input type="checkbox"/> None	Fuel: 1 <input type="checkbox"/> Gas 2 <input type="checkbox"/> Diesel 3 <input type="checkbox"/> Other: _____ 4 <input type="checkbox"/> Electric <u>Capacity (from plate, if any):</u> _____ persons <u>Horsepower:</u> _____ h.p. <u>Toilet</u> <input type="checkbox"/> Yes <input type="checkbox"/> No
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ATV/SNOWMOBILE/ORM/ORV Electric DOT Titled

Previous Title No (if any): _____ Registration No (if any): _____

Make _____ Color _____ Model _____ VIN _____

Antique Snowmobile Model Year: _____ CC: _____ Dry Wt. in Lbs: _____ No. of Wheels: _____

(OVER FOR TITLING, DEALER SALES INFORMATION, BONDING, AND SIGNATURES)

COUNTY RECORDER USE ONLY: 1 Transfer Without Consideration
 2 Homemade
 3 Government, Nonprofit
 4 Tax Paid Dealer
 5 Tax Paid Other State
 6 Purchase for Resale
 7 Casual Sale
 8 Other
 9 No Exemption
 10 Tax Exempt

SELLER Name _____ Address _____ Purchase Date _____

EVIDENCE OF OWNERSHIP
 I present the following evidence of ownership: Manufacturer's Statement Foreign Title Certificate Reconstructed/Rebuilt
 Operation of Law Affidavit Specially Constructed/Homemade Registration Certificate

LIEN/SUB LIEN Does this vehicle/vessel have a lien? Yes No

1st Lienholder _____ Street Address _____ City/State/Zip _____

2nd Lienholder _____ Street Address _____ City/State/Zip _____

BOND (Use this section only if you have purchased a bond)

Book Value: \$ _____
 (can be obtained from an Iowa registered dealer or current NADA value.)
 Bond Amount: \$ _____
 (minimum of 1 1/2 times book value)

Dealer No. _____ Dealership Name _____ Dealership Signature _____

I have visually examined this vehicle/vessel and have checked for wants/stolen.
 Officer Signature: _____ Date: _____
 Iowa DNR

DEALER USE ONLY: Sale Price \$ _____ Registration Fee Collected \$ _____ Date Acquired: _____
 Less Trade-In \$ _____ Sales Tax Collected \$ _____
 Equals Tax Price \$ _____
 Tax Previously Paid \$ _____

I certify under penalty of perjury that the foregoing is true and correct.
DNR Dealer No. _____ Dealership Name _____ Dealership Signature _____

SIGNATURES Important: Be certain that dates and other information given are correct. Any person who uses a false or fictitious name, makes a false statement or otherwise commits a fraud upon this application is punishable by imprisonment and possible fine per Iowa Code Section 462A.23.

I attest that the Hull Identification Number (HIN) or Vehicle Identification Number (VIN) is correct and permanently affixed to the vessel or vehicle for which I am making application. I have reviewed all information above and acknowledged that it is accurate and true.

Signature of: Owner/ Security Holder #1: _____ Date: _____
 Signature of: Owner/ Security Holder #2: _____ Date: _____
 Signature of: Owner/ Security Holder #3: _____ Date: _____