

Title #: _____

APPLICATION

Registration # (IA #): _____

REGISTRATION

— Owner/Buyer Information —

Iowa Resident

Nonresident

The 1st owner will be listed as the primary owner shown on the registration.

Last Name

First Name

Middle Name

Birth Date

<input type="checkbox"/> And	#1	_____	_____	_____	_____
<input type="checkbox"/> Or	#2	_____	_____	_____	_____
	#3	_____	_____	_____	_____
	#4	_____	_____	_____	_____

Current Residence & Mailing Address of primary owner (#1 above):

Street Address/PO Box

City

State

Zip Code

Phone Number: _____ Email: _____

Provide one of the following identification numbers for primary owner (#1 above):

DNR Number

or Iowa Driver's License Number

or Social Security Number

Primary owner (#1): _____

Primary owner (#1): Gender: M F Height: _____ FT. Weight: _____ Eye Color: _____

IN.

APPLICATION DATE: _____ COUNTY OF REGISTRATION: _____

IOWA APPLICATION FOR:	1 <input type="checkbox"/> BOAT	6 <input type="checkbox"/> REGISTRATION	8 <input type="checkbox"/> TITLE	10 <input type="checkbox"/> BOND	12 <input type="checkbox"/> LIEN
	2 <input type="checkbox"/> ATV	7 <input type="checkbox"/> DUPLICATE REGISTRATION	9 <input type="checkbox"/> DUPLICATE TITLE	11 <input type="checkbox"/> OTHER	13 <input type="checkbox"/> SUBSEQUENT LIEN
	3 <input type="checkbox"/> SNOW				
	4 <input type="checkbox"/> ORV				
	5 <input type="checkbox"/> ORM				

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

Boat Name: _____ Port Name: _____

Make _____ Model _____ Homemade

Toilet _____ Color _____ Model Year _____ Boat Length _____ Boat Width _____ HIN _____

Yes No _____ FT. _____ IN. _____ FT. _____ IN. _____

<u>Type of Use:</u> 1 <input type="checkbox"/> Pleasure 2 <input type="checkbox"/> Dealer 3 <input type="checkbox"/> Livery Rental 4 <input type="checkbox"/> Official 5 <input type="checkbox"/> Commercial Passenger 6 <input type="checkbox"/> Commercial Fishing 7 <input type="checkbox"/> Other: _____	<u>Type of Boat:</u> 1 <input type="checkbox"/> Cabin Cruiser 2 <input type="checkbox"/> Canoe 3 <input type="checkbox"/> PWC (Jet Ski, Wave Runner) 4 <input type="checkbox"/> Houseboat 5 <input type="checkbox"/> Pontoon 6 <input type="checkbox"/> Rowboat 7 <input type="checkbox"/> Runabout 8 <input type="checkbox"/> Sailboat 9 <input type="checkbox"/> Other: _____ 10 <input type="checkbox"/> Kayak 11 <input type="checkbox"/> Bass Boat 12 <input type="checkbox"/> Jon Boat	<u>Hull Material:</u> 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"/> Inflatable	<u>Propulsion:</u> 1 <input type="checkbox"/> Outboard 2 <input type="checkbox"/> Inboard 3 <input type="checkbox"/> Outboard-Inboard 4 <input type="checkbox"/> Sail 5 <input type="checkbox"/> Other Nonpower-Nonsail 6 <input type="checkbox"/> Paddle-Oars	<u>Fuel:</u> 1 <input type="checkbox"/> Gas 2 <input type="checkbox"/> Diesel 3 <input type="checkbox"/> Other <u>Capacity (from plate, if any):</u> _____ persons <u>Horsepower:</u> _____ h.p.
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ATV/SNOWMOBILE/ORM/ORV Electric

DOT Titled Previous Title No. (if any): _____ Registration No.: _____

Make _____ Color _____ Model _____ VIN _____

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

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

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

TITLE/LIEN/SUB LIEN	<u>Seller Name</u>	<u>Seller Address</u>	<u>Purchase Date</u>
I present the following evidence of ownership:	<input type="checkbox"/> Manufacturer's Statement	<input type="checkbox"/> Foreign Title Certificate	<input type="checkbox"/> Reconstructed/Rebuilt
	<input type="checkbox"/> Operation of Law Affidavit	<input type="checkbox"/> Specially Constructed/Homemade	<input type="checkbox"/> Registration Certificate
Lien#: _____	(If none, so state: _____)		
<u>1st Security Interest Held By</u>	<u>Street Address</u>	<u>City/State/Zip</u>	
_____	_____	_____	
Lien#: _____	(If none, so state: _____)		
<u>2nd Security Interest Held By</u>	<u>Street Address</u>	<u>City/State/Zip</u>	
_____	_____	_____	

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)	
<u>Dealer No.</u>	<u>Dealership Name</u>	<u>Dealership Signature</u>
_____	_____	_____
Officer Signature: _____	Date: _____	
Iowa Department of Natural Resources		

DEALER USE ONLY:	Sale Price \$ _____	Registration Fee Collected \$ _____	Date Acquired: _____
	Less Trade-In \$ _____	Sales Tax Collected \$ _____	
	Equals Tax Price \$ _____	RVRS Admin Fee \$ _____	
	Tax Previously Paid \$ _____	County Rec Writing Fee \$ _____	
I / We certify under penalty of perjury that the foregoing is true and correct.			
<u>DNR Dealer No.</u>	<u>Dealership Name</u>	<u>Dealership Signature</u>	
_____	_____	_____	

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 462A.23.		
Signature of: <input type="checkbox"/> Owner/ <input type="checkbox"/> Buyer/ <input type="checkbox"/> Security Holder #1:	_____	Date: _____	
Signature of: <input type="checkbox"/> Owner/ <input type="checkbox"/> Buyer/ <input type="checkbox"/> Security Holder #2:	_____	Date: _____	
Signature of: <input type="checkbox"/> Owner/ <input type="checkbox"/> Buyer/ <input type="checkbox"/> Security Holder #3:	_____	Date: _____	
Signature of: <input type="checkbox"/> Owner/ <input type="checkbox"/> Buyer/ <input type="checkbox"/> Security Holder #4:	_____	Date: _____	