

Vehicle Industry News VIN 2025–08 Boat 227 and REG 227 Form Revisions

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Issue Date: September 8, 2025

New Information

The Application for Replacement or Transfer Vessel Title (BOAT 227) (NEW 11/2024) form was created at the request of the United States (U.S.) Coast Guard. Effective immediately, all vessel transactions requiring an application for a replacement title **must** use the new vessel-specific form.

The Application for Replacement or Transfer of Title (REG 227) (REV 9/2024) form was revised to remove all vessel references.

The current inventory of REG 227 (Rev 9/2021) will be accepted for **non-vessel** transactions until supplies have been depleted.

NOTE: Both forms will be available online only.

Procedures

Continue to follow the procedures in *Vehicle Industry Registration Procedures Manual*, Chapter 24.

The BOAT 227 has the same format as the REG 227, except that Sections 1 and 2 make the form specific to vessels only. As mandated by federal regulations, this section captures all key vessel identifiers, including driver's license/identification (ID) card number and date of birth, or company tax ID number when applicable.

Background

All forms used for vessel transactions **must** be compliant and properly identify the vessel and its owner. Therefore, the Department of Motor Vehicles created a form for vessels only, similar in content to the existing REG 227.

References

Code of Federal Regulations §174.17 Vehicle Industry Registration Procedures Manual, Chapter 24 VIN 2024–12 BOAT 101 Form Revision

Distribution

Notification of this memo (available at **dmv.ca.gov** by searching Vehicle Industry Services) was sent through the California DMV Automated Email Alert System in September 2025 to:

- Dealers
- Registration Services

Contact

Direct questions related to this memo to DMV Customer Care at (916) 657-6560.

Attachments (2)



APPLICATION FOR REPLACEMENT OR TRANSFER VESSEL TITLE

The Mussel Fee Sticker (Quagga) is required if the vessel is operating in fresh water. Failure to display the Mussel Fee Sticker may result in citation. To purchase online, go to **DMV.ca.gov/MusselFee**, or sticker may be purchased at your local DMV office.

citation. To purchase online, go to DN	IV.ca.gov/MusselFe	e , or sticker	may be purcha	ased at your lo	ocal DMV office	е.	
This form cannot be used to release	a lien on a vessel w	ith an Elect	ronic Lien Title	(ELT).			
Replacement Title (Complete	Section 1 -4)						
Transfer of Ownership with Re	placement (Seller c	ompletes S	ection 1 – 5) ar	nd New Owne	er Completes	Section 7	and 8
SECTION 1 — VESSEL INFOR	RMATION						
STATE LAST REGISTERED VESSEL NUMB	ER ISSUED (CF#)	STATE OF F	PRINCIPAL USE	HULL IDENTIF	ICATION NUMBER	(HIN)	
MAKE MODEL	LENGTH		YEAR MODEL	YEAR	BUILT	MONT	H BUILT
VEGGEL EVEE (OL)		N DDG			(0)		
VESSEL TYPE (Check one)	Engine Drive (Check one)	· .	PULSION (<i>Ched</i> I—Manual		(Check one) –Diesel	_	ERIAL(Checkone)
M—Cabin Motorboat P—Personal W H—Houseboat U—Pontoon Bo	alciciali		ı—ıvıanuaı —Water Jet		–Diesei –Gas		
I—Inflatable Boat	O—Outbo	ard T	—Air Thrust		–Electric	F—Fibe	rglass
E—Air Boat S—Sailboat (Sa			Propeller	L X-	-Other	⊒ R—Rubl ⊒ S—Stee	ber/Vinyl/Canvas
J—Paddlecraft	ailboat S—Sterno X—Other		—Sail Only —Other			S_Stee	
	□ X Other					X—Othe	er
USE (Check one). See Page 4 for De	finitions.						
☐ Pleasure ☐ For Hire (Charter Fish	0,		Commercial Pa	ssenger Carryi	ng 🗌 Rent o	r Lease	
Other Commercial Operation	ealer or Manufacture	Demonstrat	ion				
SECTION 2 — REGISTERED OV	NER(S) INFORM	ATION Eac	ch owner mus	st sign belov	v.		
Print true full name(s) as it appears o	n driver license or ide	entification c	ard. Once regis	tered, upon tr	ansfer of owne	ership, co-	owners joined by
"AND" require the signature of each of	•	-		•	•	-	,
TRUE FULL NAME OF OWNER (LAST, FIRST, MIDDLE, SUFFIX	(JR., SR., III, ETC.), BUSINESS NA	ME OR LESSOR)	ATE OF BIRTH (INDIVID	DUALS ONLY)(MM/DD	YYYYY) DRIVER LICEI	NSE/ID CARD NU	MBER (INDIVIDUALS ONLY)
TRUE FULL NAME OF CO-OWNER OR LESSEE AND OR	(LAST, FIRST, MIDDLE, SU	JFFIX)	ATE OF BIRTH (INDIVID	DUALS ONLY)(MM/DD	VYYYY) DRIVER LICEI	NSE/ID CARD NU	MBER (INDIVIDUALS ONLY)
PHYSICAL RESIDENCE OR BUSINESS ADDRESS	(INCLUDE ST., AVE., ETC.)	UNIT NUM	BER <i>(APT., STE., ETC</i>	C.)	COMPANY TAX I	D	
CITY			STATE	ZIP CODE	VESSEL EQUIPM	IENT NUMBEI	R (OPTIONAL)
ADDRESS WHERE VESSEL IS PRINCIPALLY KEPT	(IF DIFFERENT FROM PH)	SICAL ADDRES	S ABOVE) CITY		CC	DUNTY	
			,				
MAILING ADDRESS (IF DIFFERENT FROM PHYSI	CAL ADDRESS ABOVE)	UNIT NUMI	BER CITY			STATE	ZIP CODE
	-		OLTY			07175	710.0005
LESSEE ADDRESS (IF DIFFERENT FROM ABOVE	:)	UNIT NUMI	BER CITY			STATE	ZIP CODE
SECTION 3 — LEGAL OWNER O	OF RECORD (LIEN	IHOLDER/	TITLE HOLDE	ER) — Do no	ot enter nam	e of own	ers above.
NAME OF BANK, FINANCE COMPANY, OR INDIVI	DUAL HAVING A LIEN ON T	HIS VESSEL					
BUSINESS OR RESIDENCE ADDRESS	AP1	T./SPACE/STE.#	CITY			STATE	ZIP CODE
SECTION 4 — MISSING TITLE S	TATEMENT — WA	ARNING: Is	suance of a r	eplacement	title cancel	s the orig	inal title.
If your address is different then what	annears in the Dane	rtmont's roo	arda van must t	file this applies	tion in norsen	bring the	original or photo
If your address is different than what copy of proof of ownership (i.e. Regist							
The Certificate of Title issued for this v	vessel is (<i>check box</i>):	: Los	t Stolen	☐ Illegibl	e/Mutilated (A	ttach old ti	tle)
☐ Not Received from Prior Owner	☐ Not Received fr	om DMV (A	llow 30 days fro	m issue date)			
I agree to indemnify and save har replacement Certificate of Title. I certificate and correct.	mless the Director rtify (or declare) und	of Motor Voler penalty o	ehicles for any of perjury unde	loss sufferer the laws of t	ed resulting fi he State of Ca	rom the is lifornia th	ssuance of said at the foregoing
PRINTED NAME OF OWNER	SIGNATURE OF OWNER	D.A	ATE	TELEPHONE O	R EMAIL ADDRESS	3	
<u></u>	X				5,,_6		

						Ittaciii	licit	•						
	VESSELN	NUMBER IS	SSUED (CF#)	HULL IDENTIFIC	CATION NUMBE	R (HIN)								
SECTION 5 — REGISTERED OW	NER(S) RELEASE	OF OW	VNERSHIP AND/	OR INTERE	ST									
NOTE: The signature of EACH owner in cousiness MUST include the printed na (e.g, ABC CO, by JOHN SMITH -or - J	me of the company/bu	ısiness a	and an authorized r											
//we released interest in the desc California that the forgoing is true		tify (or	declare) under p	enalty of pe	erjury under	the laws o	of the Stat	te of						
PRINTED NAME OF OWNER	SIGNATURE OF OWNER		DATE	TELEPHONE OF	R EMAIL ADDRES	RESS								
PRINTED NAME OF OWNER	SIGNATURE OF OWNER		DATE	TELEPHONE OF	R EMAIL ADDRES	SS								
SECTION 6 — LEGAL OWNER O	F RECORD RELEA	ASE OF	OWNERSHIP A	ND/OR INTE	EREST — /	Must be not	tarized.							
The undersigned lienholder (legal (REG 166) form cannot be used for replacement title first, and then releas	non-ELT participants.	The leg												
PRINTED NAME OF AUTHORIZED AGENT SIGNING	FOR COMPANY	TITLE OF	AUTHORIZED AGENT SIG	ONING FOR COMPA	ANY	TELEPHONE NU	MBER							
SIGNATURE OF LEGAL OWNER (COMPANY NAME A	AND AUTHORIZED AGENT'S C	COUNTERS	SIGNATURE)			DATE								
NOTARY USE ONLY														
A notary public or other officer completir attached, and not the truthfulness, accur				vidual who sign	ned the docun	nent to which	this certifica	ate is						
State of California														
County of														
On before me, _	(HERE INSERT NAME A	AND TITLE (OF THE OFFICER)	,										
personally appeared	to be the person(s) what to me that he/she/they/her/their signature(s) on(s) acted, executed the	hose nar execute on the ins e instrun	me(s) is/are subscrit d the same in his/he strument the person nent.	ped to r/their (s), or		(SEAL)								
SIGNATURE						(SEAL)								
SECTION 7 — NEW REGISTERE	D OWNED(S) — De	rint true	o full name as si	hown on Dri	ivor Licons	o/Idontifica	tion Care	4						
If the vessel was purchased or received be minors), related by blood or adoption Once registered, to sell, gift, or otherwioined by "OR" require the signature of	from a qualified relativn], a Statement of Factivise transfer ownership	re [paren s (REG :	nt/child, grandparen 256) form, with a St	t/grandchild, s atement of Us	pouse, dome e Tax Exemp	estic partner, c tion, must als	or siblings (i	(must nitted.						
The signature for a company or bus countersignature on the signature line						authorized i	representat	tive's						
DATE PURCHASED OR ACQUIRED	PURCHASE PRICE	OR	IF RECEIVED AS A GIFT O ECK APPROPRIATE BOX AI EMARKET VALUE:	R TRADE,	Cift Trad	MARKET V	ALUE							
Mo Day Yr	_	THE	E MARKET VALUE:	VU VVIIE [(Gift ∐ Trad	e \$								
Print true full name(s) as it appears or 'AND" require the signature of each o	vner; co-owners joined	d by "OF	R" require the signa	ture of only or	ne owner (<i>ch</i>	eck only one	box below	v).						
RUE FULL NAME OF OWNER (LAST, FIRST, MIDDLE, SUFFIX	(JR., SR., III, ETC.), BUSINESS NAME	E OR LESSOF	R) DATE OF BIRTH (INDIVID	UALS ONLY)(MM/DD/	YYYY) DRIVER LIC	ENSE/ID CARD NUME	3ER (INDIVIDUALS	S ONLY)						
TRUE FULL NAME OF CO-OWNER OR LESSEE (L) AND OR	AST, FIRST, MIDDLE, SUFFIX	()	DATE OF BIRTH (INDIVID	UALS ONLY)(MM/DD/	YYYY) DRIVER LIC	ENSE/ID CARD NUME	BER (INDIVIDUALS	S ONLY)						
PHYSICAL RESIDENCE OR BUSINESS ADDRESS	(INCLUDE ST., AVE., ETC.)	UNIT N	UMBER (APT., STE., ETC.)	COMPANY TAX	ID		1						
CITY			STATE	ZIP CODE	VESSEL EQUIP	MENT NUMBER	(OPTIONAL)							

Page 2 of 4 BOAT 227 (NEW 11/2024) www

	VES	SEL NUME	BER ISSUED	(CF#)		н	JLL IDEI	NTIFIC	NOITA	NUMBER	(HIN)				
MAILING ADDRESS (IF DIFFERENT FROM PHYSIC	CAL ADDRESS ABOVE)	UN	NIT NUMBER	2	CIT	Υ					STATI	Ē	ZIF	CODE	
VEGGET OF TRAILER OF A CALLED BUILDING FOR THE		1011 15 015	EEDENT ED		(0.10.4.1			500.4		Taguni	T) (
VESSEL OR TRAILER COACH PRINCIPALLY KEPT A	I (ADDRESS OR LOCATI	ON - IF DIF	FERENI FRO	<i>ЭМ РН</i> Ү	SICAL	BUSINES	SS ADDR	ESS A	BOVE)	COUN	ΙΥ				
USE (Check one). See Page 4 for Det	initions														
Pleasure For Hire (Charter Fis		ercial Fi	shina 🗆] Cor	nmer	cial Pa	esena	er Ca	arrying		Rent or	rles	256		
Other Commercial Operation D	• -			_	IIIIICI	olai i c	isserig	01 00	an ying	Ш'	CIII OI	LUC	150		
Exempt from Fees (Check one)															-
State City County Dis	strict or Municipality	/ □ Fe	ederal Age	ncv	П	outh G	roup								
									4 40 40				F nroo		4 4bis
The above owner mailing address is mailing address pursuant to Sectio laws of the State of California that to	n 1808.21 of the	Californ	ia Vehicl												
SIGNATURE(S) OF ALL NEW OWNER(S)	DATE		TELER	PHONE	OREN	/AIL ADI	DRESS					-			
X															
SIGNATURE(S) OF ALL NEW OWNER(S)	DATE		TELER	PHONE	OR EN	AIL ADI	DRESS								
X															
SIGNATURE(S) OF ALL NEW OWNER(S)	DATE		TELER	PHONE	OR EN	IAIL ADI	DRESS								
X															
SECTION 8 — NEW LEGAL OWN	NER (LIENHOLE	DER/TIT	TLE HOL	DEF	R) —	If noi	ne, ch	eck	this k	oox []				
Attention ELT Legal Owners: ELT # mg	ust be shown and	the nam	e and add	dress	mus	t be er	ntered	exac	tly as	shown	on the	e <u>EL</u>	<u>.T listin</u>	ıg.	
TRUE FULL NAME OF BANK/FINANCE COMPANY	OR INDIVIDUAL — DO I	NOT RE-EN	NTER NAME	OF NE	W REG	ISTERE	OWNE	R(S) A	BOVE	ELECTR	ONIC LII	ENHO	LDER ID	NO.	
										ELT#					
PHYSICAL RESIDENCE OR BUSINESS ADDRESS	(INCLUDE ST., AVE., ET	rc.) Af	PT./SPACE/S	TE.#	CIT	Υ					STATI	E	ZIF	CODE	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE	E)	AF	PT./SPACE/S	TE.#	CIT	·Y					STATI		ZIF	CODE	
SECTION 9 — DEALER'S RELEA	ASE OF ACQUI	RED VE	HICLE												
NAME OF DEALERSHIP	NAME OF BUYE	R				DAT	ESOLD			R/S N	IUMBER				
SIGNATURE OF DEALER AGENT	PRINTED NAME	OF DEALE	ER AGENT			DEA	ALER NU	MBER		SALE	SPERSO	ли ис	JMBER		
X															
NAME OF DEALERSHIP	NAME OF BUYE	R				DAT	ESOLD			R/S N	IUMBER				
SIGNATURE OF DEALER AGENT	PRINTED NAME	OF DEALE	ER AGENT			DEA	ALER NU	MBER		SALE	SPERSO	JN NC I	JMBER I	1	ı
X													- 1		1

VESSEL USE DEFINITIONS

FOR HIRE CHARTER FISHING — (CCR §190.05) is defined as vessel carrying a passenger(s) for hire who is (are) engaged in recreational fishing and is a combination of 'commercial service' and 'passenger for hire'.

COMMERCIAL — DEEP SEA FISHING (Exempt from Use Tax)

Vessel will be used 50% or more of the time in commercial deep sea fishing operation outside the territorial waters. (For commercial vessels over 30' in length, a letter from the U.S. Coast Guard is required stating the vessel is not required to be documented.)

Rent or Lease: LIVERY — (California Code of Regulations (CCR) §190.04)

A livery boat is any vessel subject to registration under the California Vehicle Code (CVC) that is held primarily for the purpose of renting, leasing or chartering to others.

GOVERNMENT — (CCR §§190.16 and 190.17)

A public undocumented vessel belonging to the State, City, County, District or Municipality, or Federal agencies of the United States that is used for governmental purposes and is clearly identifiable as such.

YOUTH GROUP — (CVC §9870)

Applicant is a nonprofit public corporation governed by the Nonprofit Public Benefit Corporation Law (Part 2 [commencing with Section 5110] of Division 2 of Title 1 of the Corporation Code), which purposes relate to promoting the ability of boys and girls to do things for themselves, to train them in scout craft and camping and to teach them patriotism, courage, self-reliance and kindred virtues.

Privacy Notice on Collection

DMV collection of personal information is governed by: *California Information Practices Act, Civil Code* §1798 et seq; *Government Code* (GC) §11015.5; *California Public Records Act* GC §6250 et seq.; *California Vehicle Code* §1808; *Driver's Privacy Protection Act* (18 *United States Code* §§2721-2725).

The information collected may be shared with state and/or local agencies that support the Vessel Program. Submission is mandatory for each information item on this form. DMV uses this information to issue registration numbers and certify ownership for undocumented vessels. Failure to provide mandatory information may result in rejection of application for registration number, certificate of ownership, and certificate of number for undocumented vessel. You have the right to review and request corrections/ deletions of DMV maintained records containing your personal information. Questions about this form should be directed to DMV's Customer Service Center at 1-800-777-0133.

For privacy policy questions or requests contact us at: DMV Chief Privacy Officer, 2415 First Avenue, MS F127, Sacramento, CA 95818 or (916) 657-6340.





APPLICATION FOR REPLACEMENT OR TRANSFER OF TITLE

DMV USE ONLY												
DL/ID#		STATE	TECH. INITIALS									

This form cannot be used to release a lien o		ctronic Lien Title (ELT)				
Replacement Title (Complete Sections Transfer of Title with Replacement (Se	•	ns 1 - 4 New Own	ner complete	s Sections 6 a	nd 7 as ne	eded)	
	CLE IDENTIFICATION NUMBER					YEAR/MAKE OF VE	HICLE
SECTION 1 — REGISTERED OWNE		— Please prin	nt name as				
TRUE FULL NAME (LAST, FIRST, MIDDLE, SUFFIX), BUSINI	ESS NAME, OR LESSOR			DRIVER LICENSE	E/ID CARD NUM	IBER I I I	STATE
CO-OWNER TRUE FULL NAME (LAST, FIRST, MIDDLE, SUF	FEIX)			DRIVER LICENSE	E/ID CARD NUM	IRER	STATE
OF STATES THE TOTAL THE STATES AND SEED, OF	1 100						01/112
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE	EST., AVE., ETC.) APT./SPACE	/STE. # CITY			STATE	ZIP COD	E .
COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE IS	S PRINCIPALLY GARAGED						
COUNTY OF REGISEROE ON COUNTY WHERE VEHICLE IN	STRINGII ALLI GARAGLE						
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	APT./SPACE/	/STE. # CITY			STATE	ZIP COD	E
SECTION 2 — LEGAL OWNER OF F	RECORD (LIENHO	LDER/TITLE H	OLDER) -	– Do not en	ter name	of owners a	above.
NAME OF BANK, FINANCE COMPANY, OR INDIVIDUAL HAV	· · · · · · · · · · · · · · · · · · ·		<i></i>	20 1100 011	101 1101110		1.00101
BUSINESS OR RESIDENCE ADDRESS	APT./SPACE/	/STE. # CITY			STATE	ZIP COD	
BOSINESS OF RESIDENCE ADDRESS	AF I./GFAGE/	OIL.# OIT			SIAIL	ZIF COD	_
SECTION 3 —MISSING TITLE STAT	EMENT — WARNI	NG: Issuance	of a replac	ement title	cancels	the original	title.
If your address is different than what appear proof of ownership (i.e. Registration Card or	ars in the Department's	records, you mus	st file this app	olication in per	son, bring t	he original or p	photo copy of
within the last 90 days, a CHP vehicle verific	cation is required.	Notice), and your		se or identifica	uon Caru. 1	i tile title rias b	een replaced
The Certificate of Title issued for this vehicle	,			Illegible/Mutila	ated (<i>Attach</i>	old title)	
	Not Received from DM\						
I agree to indemnify and save harmless to Certificate of Title. I certify (or declare) un	he Director of Motor V	ehicles for any l	oss suffered	d resulting fro	om the issu	ance of said i	replacement
PRINTED NAME OF OWNER	SIGNATURE OF OWNE		DAT			IE NUMBER	and correct.
	X				()		
SECTION 4 — REGISTERED OWNE	R(S) RELEASE OF	OWNERSHIP	AND/OR	INTEREST			
I/we release interest in the described ve	hicle. NOTE: The sign	nature of EACH o	wner is requ	ired if co-own	ers are join	ed by AND (s	hown by / on
DMV records). The signature for a company countersignature on the signature line (e.g.,	or business MUST inc ABC CO by JOHN SI	slude the printed n MITH - or - JOSEA	ame of the c	ompany/busin <i>r ABC CO</i>)	ess and an	authorized rep	oresentative's
PRINTED NAME OF OWNER	SIGNATURE OF OWNE		DAT		TELEPHON	IE NUMBER/ EMAI	L ADDRESS
	X						
PRINTED NAME OF OWNER	SIGNATURE OF OWNE	ĒR	DAT	E	TELEPHON	IE NUMBER/ EMAI	L ADDRESS
SECTION 5 — LEGAL OWNER OF		E OE OWNEDS	SHID AND/	OD INTEDE	ST — Mu	et ho notar	izod
The undersigned lienholder (legal own							
(REG 166) form cannot be used for non-ELT	T participants with vehic	les 2 model years	old or newe				
of record must apply for a replacement title to PRINTED NAME OF AUTHORIZED AGENT SIGNING FOR C		nterest on the actu TITLE OF AUTHORIZE			TELEPHON	IE NUMBER	
FINITED NAME OF ACTIONIZED AGENT SIGNING FOR C	OWIFAINT	TITLE OF AUTHORIZE	DAGENT SIGNI	NG FOR COMPAINT	(I NOWBER	
SIGNATURE OF LEGAL OWNER (COMPANY NAME AND AL	JTHORIZED AGENT'S COUNTE	RSIGNATURE)		DATE	EMAIL AD	DRESS	
X							
NOTARY USE ONLY							
A notary public or other officer completing this and not the truthfulness, accuracy, or validity of State of California		ne identity of the inc	dividual who s	signed the docu	ment to whi	ch this certificat	e is attached,
County of				_			
Onbefore me,				-1			
personally appeared	(HERE INSERT NAME AND		R) Ino proved to	, D			
me on the basis of satisfactory evidence to b	e the person(s) whose i						
within instrument and acknowledged to me that	he/she/they executed the	e same in his/her/th	neir authorize	d			
capacity(ies), and that by his/her/their signatu behalf of which the person(s) acted, executed t		uie person(s), or ti	ie enuty upo	II.			
I certify under PENALTY OF PERJURY under		of California that	the foregoing	g			
paragraph is true and correct.					(9	EAL)	
WITNESS my hand and official seal.					(3	-/\-/	

THIS SIDE FOR NEW OWNERS - EACH NEW OWNER MUST SIGN BELOW

Complete transfer within 10 days of taking possession of vehicle.

wust comp	iete ve	ilicie	IIIOIII	aliUi	<i>i</i> bei	ow.																				
VEHICLE LICENSE PLATE NUMBER VEHIC						HICLE IDENTIFICATION NUMBER										1				Y	/EAR/M	AKE O	F VEHIC	CLE		
		\perp												L												
SECTION	6 — N	EW R	EGIS	TER	ED	OWN	ER(S	<u>) — I</u>	Prii	nt tr	ue ful	I na	me a	as :	show	n on	Driv	er L	icen	se/l	dent	ifica	tion	Card	d.	
If the vehicle be minors, r Once registe joined by "O	related i ered, to	by blo sell,	od or a gift, or	dopti othe	ion)], rwise	, a Sta e trans	atemer sfer ov	nt of F vners	act	ts (RI	EG 25	6) fo	rm, S	tate	ement	of Us	se Tax	Exe	mptic	on, n	nusť a	also b	e suk	omitte	èd.	
The signatu																				n aı	ıthori	zed i	repre	senta	itive's	
Countersigna DATE PURCHASI			signatu	re lin	e (e.		BC CO		JOF								or AB	C CC).).		MARKE	TVALL				
Mo.			٧r			\$	HASE PR	IICE			OR IF RE CHECK A THE MAR	CEIVE NPPRO KET V	ED AS A PRIATE ALLIF:	BO	FT OR T	RADE, VRITE	☐ Git	ft 🗆	Trad			VALO	_			
TRUE FULL NAM				IRST, M	MIDDL		IX), BUSI	NESS N	IAME			/\L/ V	ALUL:				ER LICE	NSE/II	CARD		<u> </u>			STAT	ΓE	
																					1					
TRUE FULL NAM AND OR	E OF CO-(OWNER	OR LESS	EE (LAS	ST, FIR	RST, MIDI	DLE, SU	FFIX)								DRIV	ER LICE	NSE/II	CARE	NUM	BER		1	STAT	ΓE	
TRUE FULL NAM	E OF CO-0	OWNER	OR LESS	EE (LAS	ST, FIR	RST, MIDI	DLE, SU	FFIX)								DRIV	ER LICE	ENSE/II	CARD	NUM	BER			STAT	ſΕ	
☐ AND ☐ OR																										
PHYSICAL RESID	DENCE OR	BUSINE	SSADDR	ESS (IN	ICLUD	E ST., AV	VE., ETC.) APT./S	SPAC	CE/STE	.# CI	TY							STAT	E		ZIP (CODE			
COUNTY OF RES	SIDENCE (ITV WHE	RE VEL	IICI E	IS PRINC		GARAGI	FD							FOLL	IPMENT	NIIMR	FR (OF	TIONA	1/)					
COUNTY OF INEC	SIDLINGE (JIK COOI	VII VVIIL	IXL VLI	IIOLL	IS FIXING	SIFALLI	GAIVAGI	LU							LQU	IF IVILIN I	INOIVID	LIX (OF	HONE	1L)					
MAILING ADDRE	SS (IF DIF	FERENT	FROM A	BOVE)				APT./S	SPAC	CE/STE	. # CI	TY							STAT	E		ZIP (CODE			
The above mailing add laws of the	owner dress p	mailir oursua	ng add	lress Secti	is v	alid, e	existin 21 of ti	he Ca	alifo	ornia	Vehic															
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X														())										
SIGNATURE(S) C	OF ALL NE	W OWNE	R(S)							DATE TELEPHONE NUM						NUME	NUMBER EMAIL A					. ADDRESS				
SIGNATURE(S) C	SE ALL NIEV	A/ ONA/NE	D(C)							DATE				() EDHONI	= NILINAE	DED	-	EMA	II A DI	DRESS					
X	OF ALL INE	W OWNE	K(3)							DATE			TELEPHONE NUMBER						EWIA	IL ADI	JUNESS					
SECTION	7 — N	FW I	FGAI	ΟW	/NF	P (1 11	ENH() DE	P/	TITI	E HO	וח ו	<i>EP</i> \ _	_ I:	f non	O 14/1	rito "l	Non								
																				wn o	n the	FIT	lietin	п П		
										name and address must be entered ex TER NAME OF NEW REGISTERED OWNER(S) ABOVE								ELECTRONIC LIENHOLD								
																			ELT	#						
PHYSICAL RESID	ENCE OR	BUSINE	SS ADDR	ESS (IA	ICLUD	E ST., AV	/E., ETC.)) APT./S	SPAC	CE/STE	. # CI	TY							STAT	E		ZIP (CODE			
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPAC						SPAC	CE/STE	.# CI	TY							STAT	E		ZIP (CODE						
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Privacy Notice on Collection

- DMV collection of personal information is governed by: CA Information Practices Act, Civil Code §1798 et seq; Government Code (GC) §11015.5; CA Public Records Act GC §6250 et seq.; CA Vehicle Code §1808; Driver's Privacy Protection Act (18 United States Code §§2721-2725).
- The information collected may be shared with authorized service providers, state, federal, and/or local government agencies, law enforcement, and commercial entities as authorized by law.
- DMV uses this information to process replacement or transfer of titles requests.
- All information on this form is mandatory.
- Failure to provide mandatory information may result in rejection of application for replacement or transfer of title.
- You have the right to review and request corrections/deletions of DMV maintained records containing your personal information.
- Questions about this form should be directed to DMV's Customer Service at 1-800-777-0133.
- For privacy policy questions or requests contact us at: DMV Chief Privacy Officer, 2415 First Avenue, MS F127, Sacramento, CA 95818 or (916) 657-6340.

UNION LABOR.