



APPLICATION FOR MOTOR VEHICLE TRANSACTION(S)

Info Off Stamp

PLEASE SEE OVERLEAF FOR INSTRUCTIONS BEFORE COMPLETING THIS FORM

Section A - TRANSACTION(S)

1. Transaction(s) Required: [] Modification to Vehicle/Amendments to Particulars. [] Certificate of Title. [] Registration and Licensing of Vehicle Not Previously Registered in Jamaica. [] New Registration Plates. [] Personalized Registration Plates. [] Transfer of Ownership.

Section B - VEHICLE

2. Motor Vehicle ID Number 3. Type of Vehicle 4. Make 5. Year 6. Colour 7. Chassis Number 8. Engine Number 9. Certificate of Fitness Number: Issue Date: Year Month Day Expiry Date: Year Month Day 10. Weight: Laden kg Unladen kg 11. Fuel: [] Petrol [] Diesel [] Other(state): 12. Type of Body: 13. Special Permit: 14. Model/Manufacturing Type 15. Seating 16. CC Rating

Section C - ACQUISITION

17. Source of Acquisition: [] Purchase [] Gift 18. Date Acquired: Year Month Day 19. Previous Certificate of Title Number 20. Vehicle Status [] New [] Used 21. Import Entry Number: 22. Date of Entry: Year Month Day 23. Import Licence Number: 24. Date of Licence: Year Month Day

Section D - LIEN HOLDER(S)

25. 1st Lien-holder's Name: 26. 2nd Lien-holder's Name: 27. 1st Lien-holder's Address: 28. 2nd Lien-holder's Address: 29. Lien Amount: \$ 30. Date of Lien: Year Month Day 31. Lien Amount: \$ 32. Date of Lien: Year Month Day

Section E - OWNER(S)

33. Owner's TRN: 34. Date of Birth Year Month Day 35. Sex [] Male [] Female 36. TRN of Additional Owner: 37. Date of Birth Year Month Day 38. Sex [] Male [] Female 39. Owner's Name: (Last name, first, middle). 40. Name of Additional Owner: (Last name, first, middle). 41. Owner's Address: 42. Address of Additional Owner: 43. Owner's Name at Birth (if different from Box 39). 44. Name at Birth of Additional Owner: (if different from Box 40).

45. Insurers:

Section F - REGISTRATION PLATES

46. Do you require new registration plates? [] Yes [] No If no, state Plate No.: If yes, state Plate Type Required [] Private [] PPV [] CC [] Personalized 47. If Personalized Plates are required, state choice in order of preference: 1st Choice: [] [] [] [] [] [] [] [] [] [] 2nd Choice: [] [] [] [] [] [] [] [] [] [] 3rd Choice: [] [] [] [] [] [] [] [] [] []

Section G - DECLARATION

48. I/We declare that I am/we are the Registered Owner(s) of the Vehicle described above and that the information given in this form is to the best of my/our knowledge and belief a true and correct statement.

Owner's Signature: _____

(If a company, state Authorised Signatory's title below)

Title: _____ Date: _____



Owner's Signature: _____

(If a company, state Authorised Signatory's title below)

Title: _____ Date: _____



WARNING: An Applicant who makes a false statement is guilty of an Offence under the Road Traffic Act.