

APPLICATION AND ASSIGNMENT OF NEW VEHICLE IDENTIFICATION NUMBER

**SECRETARY OF STATE
BUREAU OF MOTOR VEHICLES
ENFORCEMENT, ANTI-THEFT, &
REGULATIONS- TITLE SECTION**



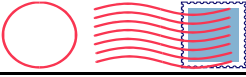
**\$33.00 FEE REQUIRED
Make Checks payable to:
SECRETARY OF STATE**

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|---|------------------|--|-----------------------|---|-----------|---|---|--|--|--|--|
| OWNERS LEGAL NAME | | | | DATE OF BIRTH | | | | | | | |
| CURRENT STREET ADDRESS | | | CITY | | STATE ZIP | | | | | | |
| APPLICATION DATE | | HOME PHONE | | WORK PHONE | | | | | | | |
| YEAR | MAKE | MODEL | BODY TYPE | MISSING VEHICLE IDENTIFICATION NUMBER – IF KNOWN | | | | | | | |
| EXACT CURRENT LOCATION OF VEHICLE –STREET ADDRESS | | | CITY | STATE | ZIP | | | | | | |
| NET WEIGHT - IF TRAILER | | CC - IF MOTORCYCLE | | ENGINE NUMBER – IF MOTORCYCLE | | | | | | | |
| <p>Subject to inspection by a Bureau of Motor Vehicle detective, the undersigned makes this application for a new vehicle identification number, to be assigned permanently to the vehicle listed above. The applicant also agrees to submit an application for a title certificate (MVT-2) to bear the new number, if this vehicle is 1995 or newer and subject to Maine title law.</p> <p style="text-align: center;">I certify that I am the owner of the vehicle described above and that said Vehicle requires a Vehicle Identification Number because (CHECK ONE REASON BELOW):</p> <p><input type="checkbox"/> Number was destroyed or obliterated</p> <p><input type="checkbox"/> Homemade vehicle</p> <p><input type="checkbox"/> Other (Explain) _____</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">OWNER'S SIGNATURE</p> <p style="text-align: center;">IMPORTANT – PLEASE ALSO READ AND COMPLETE THE BACK OF THIS FORM ➡</p> | | | | | | | | | | | |
| FOR BMV USE ONLY | | SPECIAL MOTOR VEHICLE CERTIFICATION | | FOR BMV USE ONLY | | | | | | | |
| This permanent Vehicle Identification Number has been properly affixed to the vehicle described above | | | | <table border="1" style="width: 100%; height: 30px;"> <tr> <td style="text-align: center; width: 20px;">M</td> <td style="text-align: center; width: 20px;">E</td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> </table> | | M | E | | | | |
| M | E | | | | | | | | | | |
| INSPECTOR'S NAME (PLEASE PRINT CLEARLY) | | | INSPECTOR'S SIGNATURE | | | | | | | | |
| DATE NUMBER AFFIXED | ODOMETER READING | COMMENTS | | | | | | | | | |

LIST OF PARTS TAKEN FROM OTHER VEHICLES

| PART | VEHICLE THAT PART WAS TAKEN FROM | VIN OF VEHICLE THAT PART WAS TAKEN FROM (9 – 17 CHARACTERS) | | | | | | | | | | | | | | |
|------|----------------------------------|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
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PLEASE CAREFULLY READ THE APPLICATION INSTRUCTIONS BELOW:

1. **YOU NEED TO MAIL:** 

- A.** THIS COMPLETED AND SIGNED APPLICATION
- B.** COPIES OF DOCUMENTS SHOWING COMPLETE CHAIN OF OWNERSHIP
- C.** FEE – MAKE CHECK PAYABLE TO: SECRETARY OF STATE
- D.** TITLE APPLICATION IF NECESSARY: \$33.00 FEE REQUIRED

MAIL ALL ITEMS TO THE MOTOR VEHICLE ADDRESS LISTED BELOW.

- 2. THE BUREAU OF MOTOR VEHICLES TITLE SECTION WILL ASSIGN A NEW PERMANENT VEHICLE IDENTIFICATION NUMBER
- 3. A BUREAU OF MOTOR VEHICLE DETECTIVE WILL CONTACT YOU TO MAKE AN APPOINTMENT TO INSPECT YOUR VEHICLE AND ATTACH THE NEW PERMANENT VEHICLE IDENTIFICATION NUMBER.

101 Hospital Street, #29 State House Station, Augusta, ME 04333-0029 Tel. (207) 624-9000 ext. 52139
 Fax: (207) 624-9239 TTY Users call Maine Relay 711