

## Chapter B

# Application for Title and Registration, Form 226

## Introduction

For title transactions, other than title replacement only or title corrections, submit an Application for Title and Registration, [Form 735-226](#).

## Completing the Application

### *FRONT*

#### Remarks section:

- **Dealers:** Write the CC displacement of motorcycles in this section. For mopeds, write the CC displacement and the speed capability. (This helps ensure the correct plates are issued for the vehicle.) If a plate is being transferred, write the vehicle description, including the VIN, of the vehicle from which the plates were removed in this section.
- **Manufacturers/manufacturer's representatives:** Write "Lemon Law Buyback" in this section when the vehicle has been repurchased by the manufacturer in accordance with Oregon's consumer warranty law.

#### Gray-shaded areas

- **Dealers:** When issuing a Temporary Registration Permit, Form 735-315, or Temporary Motorcycle Permit, Form 735-309, complete the permit number.
- Mark the dealer transaction box if the document is being submitted by a dealer.
- **Fee boxes:** See [Chapter M](#) for fee charts.

**NOTE:** County registration fees are to be added to the state registration fees and the total entered in the REG/REN FEE box.

All other boxes in this area are for DMV office use only.

#### Line 1

- **New Plate #:** If the plate is transferred from another vehicle, write the number of the transferred plate in this box.
- **Sticker #:** DMV office use only.
- **Vehicle Identification Number (VIN):** The VIN on the vehicle must match the VIN on the application. It also must match the VIN listed on the ownership document (see exceptions in [Chapter D](#)).
- **Oregon Title #:** Complete title number if there is an existing **Oregon** title.

#### Line 2

- **Present Oregon Plate #:** Current Oregon plate number.
- **Expiration Date:** If plates are being transferred, complete the month/day/year of expiration of transferred plates (dealers only).

- **Vehicle Description:** Year, make, and body style (see [Chapter N](#)).
- **Registration Weight/Length:** List the weight or length of the vehicle if registered by weight/length.
- **GVWR (Gross Vehicle Weight Rating) over 26,000 lbs.:** Check the appropriate box. The title fee is determined by the GVWR.

### Line 3

- **Farm ID # or Fleet Account #:** If applicable.
- **Equipment #:** Customer-assigned number. Seven digits maximum. Recorded for businesses only. Not for transaction tracking or other dealer purposes, unless dealer is titling the vehicle in the name of their dealership.
- **Motor Power:** Check the appropriate box to indicate the type of motor power. "Hybrid" should be checked for vehicles that use electricity plus another source of power. "Plug-in Hybrid" should be checked for vehicles that can be charged by plugging in to an electrical receptacle and use gasoline power. "Natural Gas" should be checked if compressed natural gas is the motor power. If "other" is checked, write in the type of power that propels the vehicle. If powered by more than one type of motor power, write in all types used.
- **Trailer over 8,000 LBS:** Mark the appropriate box to indicate the trailer's loaded weight. Does not apply to recreational trailers.

### Line 4

- **Odometer Reading and Date of Reading:** Dealers must provide the appropriate odometer disclosure (see [Chapter H](#)). This line may only be completed by the applicant if the required odometer disclosure(s) are not present. The applicant may provide a voluntary odometer reading in this section for a vehicle that is 10 years old or older.

### Line 5

- **Name of Owner:** Full legal name of registered owner or lessee (for individuals, complete as shown on ODL, ID card or instruction permit.)
- **ODL/ID/Customer # and Date of Birth:** This information enables DMV to locate the customer in the DMV database. Enter the customer number for **all** owners, including businesses. Include the date of birth for all individuals.

### Line 6

- **Owner's Residence Address:** Address must be the actual residence address of the registered owner(s) or lessee(s) listed on line 5. If the registered owner is a business, use the actual Oregon business location. If the vehicle is primarily housed or dispatched from a location different from the actual business address of the owner, you must also provide the vehicle address on line 10.
- **Mailing Address:** Complete the mailing address of registered owner(s), if it is different from the residence address listed.

### Line 7

- **City, State, ZIP Code:** This must match the residence address.
- **County of Residence:** Fill in the owner's county of residence.
- **City, State, ZIP Code:** This must match the mailing address.
- **County of Mailing:** Fill in the county of the mailing address.

### Lines 8 & 9

- **Name of Joint Owner or Lessee:** Full name of the joint registered owner or lessee (for individuals, complete as shown on ODL, ID card or instruction permit).
- **ODL/ID/Customer #:** This information enables DMV to locate the customer in the DMV database. Enter the number for **all** owners, including businesses.
- **Date of Birth:** Include the date of birth for all individuals.

### Line 10

- **One-Time Mailing Address:** Complete this area if the customer has a one-time mailing address for the current application only. This address will be used once as a special mailing address for the registered owner and is not retained on DMV systems.
- **Vehicle Address:** Vehicle address means the residence or business address where the vehicle is primarily housed, or from where the vehicle is primarily dispatched when different from the actual residence or business address of the owner.

### Line 11

- **City, State, ZIP Code:** This must match the one-time mailing address.
- **City, State, ZIP Code:** This must match the vehicle address.
- **County of Use:** If the vehicle will be used in a county other than the county of residence, provide the name of the county of use.

### Line 12

- **Current or Previous Military Service:** If an applicant is a member or veteran of a uniformed service, they may authorize DMV to send their name and address to the Oregon Department of Veterans' Affairs (ODVA) for the purpose of receiving benefit information, by printing and signing their name on this line.

### Line 13

- **Survivorship:** Check the YES or NO box to indicate survivorship. If neither box is checked, no survivorship will be shown on the title.

### Line 14

- **Security Interest Holder:** Required, if applicable. Enter the name (for individuals as shown on ODL, ID card or Instruction Permit).
- **ODL/ID/Customer #:** This information is needed so DMV can locate the customer in the DMV database. Enter the number for **all** owners, including businesses.
- **Date of Birth:** Include the date of birth for all individuals.

### Line 15

- **Security Interest Holder Address:** Include the street/city/state/zip code. If the security interest holder is an individual, use the actual residence address of the person. If it is a business, use the actual business location.
- **Telephone Number:** The telephone number is optional, but is helpful if more information is needed.

### Line 16

- **Secondary Security Interest Holder:** Required, if applicable. Enter the name (for individuals as shown on ODL, ID card or Instruction Permit).
- **ODL/ID/Customer #:** This information is needed so DMV can locate the customer in the DMV database. Enter the number for **all** owners, including businesses.
- **Date of Birth:** Include the date of birth for all individuals.

### Line 17

- **Secondary Security Interest Holder Address:** Include the street/city/state/ZIP Code. If the security interest holder is an individual, use the actual residence address of the person. If it is a business, use the actual business location.
- **Telephone Number:** The telephone number is optional, but is helpful if more information is needed.

### Lines 18 & 19

- **Lessor's Name, ODL/ID #, and Date of Birth:** If applicable. Enter the name as shown on the customer file.
- **Lessor's Address:** List the lessor's address. If the lessor is an individual, use the actual residence address. If the lessor is a business, use the actual business location.
- **Telephone Number:** The telephone number is optional but is helpful if more information is needed.

### Line 20

- **Insurance/Policy Number:** Complete when a renewal accompanies the title transfer and when there is no change in registered owners, such as when removing or changing the security interest holder, or when at least one registered owner is staying on the title.

### Line 21

- **Signature of Registered Owner or Lessee:** The signature of at least one registered owner or lessee is required and the date the application was signed.
- **Telephone Number:** The telephone number is optional but is helpful if more information is needed.

### Line 22

- **Signature of Lessor:** If a lessee, lessor and security interest holder are listed on the application, the signature of both the lessee and lessor are required. The

exception is when the lessor and security interest holder are the same. In these instances, only the lessee must sign.

## **BACK**

- **Remarks:** You may use this section to write anything that may be unusual about the transaction.
- **Reconstructed/Assembled/Replica:** Complete this section if the title was surrendered to DMV because the vehicle was an abandoned vehicle sold under ORS 819; wrecked, dismantled, disassembled, substantially altered; destroyed; totaled (for reasons other than theft); OR, if the vehicle is otherwise assembled or reconstructed or a replica (see [Chapter J](#)).
- **School Bus Registration:** Complete when registering a school bus.
- **Drug and Alcohol Testing Certification:** Use this section if the vehicle is registered with "T" plates. The applicant must complete this certification (see [Chapter L](#)).

## **NOTICE OF TRANSACTION SUBMITTED**

- Attached to this form is a yellow *Notice of Transaction Submitted*. This notice serves as evidence that a title and registration transaction has been submitted to DMV. The Notice of Transaction Submitted is only valid for this purpose when DMV has stamped or validated the application. It also serves as a receipt when initial or renewal registration has been applied for. This notice is not an indication of temporary registration. **This form should be forwarded to the customer when it is received from DMV with the validating stamp.**

DMV TITLE AND REGISTRATION HANDBOOK  
 Chapter B: Application for Title and Registration, Form 226

Example of APPLICATION FOR TITLE AND REGISTRATION, FORM 735-226  
 Actual size 8½" x 11"  
 (front)

<b>DMV USE ONLY</b>	 <b>Application for Title and Registration</b>										REMARKS:		BATCH CODE
	PLATE CODE	TRANS CODE	VT	TI	ORG	MP	PROCESS	EX	MISC	TITLE BRAND	TITLE FEE		
	PERMIT #	MEMORANDUM RECEIPT #	VIN INSPECTION: <input type="checkbox"/>	DATE / INITIALS:	LEV COMPLIANT: <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	DEALER TRANS <input type="checkbox"/>	PRE CHECKER	REG / REN FEE			
<b>VEHICLE INFORMATION</b>	1	NEW PLATE #	STICKER #	VEHICLE IDENTIFICATION NUMBER (VIN)				OREGON TITLE #				REPLACEMENT FEE	
	2	PRESENT OREGON PLATE #	EXPIRATION DATE	YEAR	MAKE	STYLE	REG WEIGHT / LENGTH	GVMR OVER 26,000 LBS. <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	PLATE TRANSFER		
	3	FARM ID #	FLEET ACCOUNT #	EQUIPMENT #	<input type="checkbox"/> GAS	<input type="checkbox"/> DIESEL	<input type="checkbox"/> HYBRID	<input type="checkbox"/> PLUG-IN HYBRID	<input type="checkbox"/> FLEX-FUEL	TRAILER OVER 8,000 LBS. <input type="checkbox"/>	YES <input type="checkbox"/>	NO <input type="checkbox"/>	TOTAL FEE
	<b>ODOMETER:</b> Federal and State laws require that you state the mileage when you transfer ownership on a vehicle 9 years old or newer. Failure to complete an odometer disclosure or providing a false statement to meet this requirement is a Class C felony under ORS 815.430. Use this certification when required to provide the odometer disclosure but unable to provide the proper disclosure from the seller. I certify the odometer disclosure listed is true and correct and a disclosure is not available on the required form from the seller. Providing an odometer reading for a vehicle 10 years old or older is voluntary.												
	4	ODOMETER READING (NO TENTHS)		DATE OF READING (MM/DD/YYYY)		I certify that, to the best of my knowledge, the odometer reading is actual mileage UNLESS one of these boxes is marked: <input type="checkbox"/> the mileage stated is in excess of its mechanical limits (has rolled over); or <input type="checkbox"/> the odometer reading is NOT actual mileage. WARNING - odometer discrepancy.							
<b>OWNER or LESSEE / ADDRESS</b>	Complete Line 5 with the owner whose address will be used for all DMV mail regarding this vehicle. List additional owners on Lines 8 and 9. (This in no way determines a priority of ownership.) If any owner listed uses a work address on DMV records, that owner must be shown on Line 5. See reverse for more information.												
	5	PRINT FULL LEGAL NAME: LAST, FIRST, MIDDLE OF (check one) <input type="checkbox"/> OWNER OR <input type="checkbox"/> LESSEE				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
	6	RESIDENCE / BUSINESS ADDRESS - (Address will be used to update your ODL / ID card)						MAILING ADDRESS (if different from residence - will be used to update your ODL / ID card)					
	7	CITY, STATE, ZIP CODE			COUNTY OF RESIDENCE			CITY, STATE, ZIP CODE			COUNTY OF MAILING		
	8	JOINT OWNER OR LESSEE - PRINT FULL LEGAL NAME: LAST, FIRST, MIDDLE (See "Change of Address" on reverse)				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
	9	JOINT OWNER OR LESSEE - PRINT FULL LEGAL NAME: LAST, FIRST, MIDDLE (See "Change of Address" on reverse)				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
<b>CURRENT OR PREVIOUS MILITARY SERVICE:</b>	10	ONE-TIME MAILING ADDRESS (Will not change your customer record)				<input type="checkbox"/> Reg. Only <input type="checkbox"/> Title Only <input type="checkbox"/> Both	VEHICLE ADDRESS - (Location of vehicle if different from residence)						
	11	CITY, STATE, ZIP CODE			CITY, STATE, ZIP CODE			COUNTY (of vehicle address or use)					
	12	I, (print name) _____, authorize DMV to send my name and address to the Oregon Department of Veterans' Affairs (ODVA) for the purpose of receiving benefit information. (Signature) X											
<b>SECURITY INTEREST HOLDER and/or LESSOR</b>	<b>SURVIVORSHIP:</b> Joint Owners or Lessees agree that title will show joint ownership with right of survivorship. <input type="checkbox"/> YES <input type="checkbox"/> NO Joint Security Interest Holders agree that title will show joint security interest with right of survivorship. <input type="checkbox"/> YES <input type="checkbox"/> NO												
	14	SECURITY INTEREST HOLDER (Bank, Finance Company, Person, etc.)				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
	15	SECURITY INTEREST HOLDER ADDRESS - INCLUDE STREET / CITY / STATE / ZIP CODE				TELEPHONE # ( )							
	16	SECONDARY INTEREST HOLDER (Bank, Finance Company, Person, etc.)				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
	17	SECONDARY INTEREST HOLDER ADDRESS - INCLUDE STREET / CITY / STATE / ZIP CODE				TELEPHONE # ( )							
	18	LESSOR (Complete only if lessee is shown as owner on Line 5 above)				ODL / ID / CUSTOMER #	DATE OF BIRTH (MM/DD/YYYY)						
	19	LESSOR ADDRESS - INCLUDE STREET / CITY / STATE / ZIP CODE				TELEPHONE # ( )							
<b>CERTIFICATIONS</b>	The owner must certify by completing all applicable statements and sign the application to apply for title and registration in Oregon. By signing this application, I also acknowledge the survivorship as indicated above. Under Oregon law, it is a crime to knowingly make any false statement on an application for title or registration (ORS 803.070, 803.075, 803.375 and 803.395). These offenses are Class A misdemeanors and are punishable by a jail sentence of up to one year, a fine of up to \$5,250 or both. Commercial Vehicle - Drug & Alcohol certifications on reverse.												
	20	INSURANCE: I certify to one of the following: 1) If this application includes registration, and this motor vehicle is subject to financial responsibility laws, I am in compliance and will remain in compliance until the vehicle is transferred; or 2) If this application includes a registration renewal for a motor vehicle, this vehicle is covered by the motor vehicle liability insurance policy listed below.				INSURANCE COMPANY (Not agent)				POLICY #			
<b>SIGNATURES</b>	DOMICILE / RESIDENCY: My place of domicile (home) is in Oregon, or I am otherwise eligible or required to register the vehicle under Oregon law (ORS 803.200, 803.350 and 803.360).												
	VEHICLE USE: If the ownership of this vehicle has not been transferred and the registration is being renewed on a tow/recovery, farm, manufactured structure trailer, or charitable/non-profit vehicle, I certify the vehicle still qualifies for special registration and the use still conforms to the law as previously certified. I certify that my special use trailer, if over eight and one-half feet in width, is used temporarily on a construction site for office purposes only.												
	21	SIGNATURE OF OWNER OR LESSEE AS SHOWN ABOVE				DATE	TELEPHONE # ( )		TELEPHONE # ( )				
22	SIGNATURE OF LESSOR (Required if security interest holder is different than lessor)				DATE	COUNTER DATE STAMP / INITIALS							

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**Example of APPLICATION FOR TITLE AND REGISTRATION, FORM 735-226**  
Actual size 8½" x 11"  
(back)

REMARKS:	(DMV USE ONLY)
<b>NAME AND ADDRESS REQUIREMENTS</b>	
<p>DMV uses a customer based file. This enables us to link all types of DMV records together for a customer. It is important that you use your customer number and the same name when conducting business with DMV. In the case of individuals, the person's date of birth (DOB) is also important.</p> <p><b>Customer Number for Persons:</b> Your customer number is your Oregon driver license (ODL), Identification card (ID) or instruction permit number. Use that number on the application. If you do not have an ODL, ID card or instruction permit, DMV will assign a customer number to you when the application is received. You must use your true name on all business you conduct with DMV. This is the name you have established on your ODL, ID card or instruction permit.</p> <p><b>Customer Number for Businesses:</b> If you know your customer number for your business, list that number on the application. Businesses must also use the same name in all business they conduct with DMV.</p> <p><b>Residence or Business Address:</b> Provide the address where you primarily reside. If the owner listed is a lessee, the address of the lessee must be shown. For a business, you must provide the address of the business.</p> <p><b>Mailing Address:</b> If you receive your mail at an address other than the residence or business address, complete the mailing address on Lines 6 and 7.</p> <p><b>Vehicle Address:</b> If the vehicle is primarily housed or dispatched from an address that is different than the residence or business address, complete the vehicle address on Lines 10 and 11. Business owners—be careful not to confuse the vehicle address with your business address or mailing address.</p> <p><b>One-time Mailing Address:</b> If you would like the title and or registration document mailed to a one-time mailing address (other than the residence, business or mailing address), you must complete the area on Lines 10 and 11.</p> <p><b>Change of Address:</b> Only the address listed for the owner shown on Line 5 will be changed if it is different than what DMV records show. <b>The address will be changed on both the vehicle and driver record. Individuals will receive an address change sticker for their ODL, ID card or instruction permit.</b> Additional owners listed on Lines 8 and 9 must complete a <i>Change of Address</i>, Form 6438, and submit it separately, or change their address online at <a href="http://www.oregondmv.com">www.oregondmv.com</a>.</p> <p><b>Work Address:</b> If any person listed on the application has a work address on file with DMV: 1) for the owner, the person must be listed on Line 5 and the work address listed on Lines 6 and 7; 2) for the security interest holder, the person must be listed on Line 14 and the work address listed on Line 15. To change your address to a work address, you must be eligible pursuant to ORS 802.250 and complete a <i>Request for Police or Public Agency Address on DMV Records</i>, Form 6438A. To change your address from a work address back to your residence address, you must submit a new <i>Change of Address</i>, Form 6438.</p>	
<b>RECONSTRUCTED / ASSEMBLED / REPLICA</b>	
<p>Complete this section if the title was surrendered to DMV because the vehicle was an abandoned vehicle sold under ORS 819.220; wrecked, dismantled, disassembled, substantially altered; destroyed; totaled (for reasons other than theft) OR if the vehicle is assembled or reconstructed or a replica. I certify that this vehicle is (CHECK ONE ONLY):</p> <p><input type="checkbox"/> A reconstructed vehicle whose body looks like the vehicle described on the front of this application; or</p> <p><input type="checkbox"/> An assembled vehicle whose body does not resemble any particular year model or make of vehicle (show year in which work was completed as "YEAR" of vehicle, and "ASMBL" in "MAKE" field on Line 2 of this application).</p> <p><input type="checkbox"/> A replica whose body is built to resemble and be a reproduction of a vehicle with the given year and make as described on this application.</p> <p>I further certify that if the frame or unibody used in constructing this vehicle contains a vehicle identification number (VIN), it is shown on Line 1 of this application. <b>LIST OTHER VIN OR IDENTIFYING NUMBERS FROM OTHER MAJOR PARTS USED.</b> Major parts may be the body (if not unibody), engine, kit, or axles (if a trailer).</p>	
PART NAME AND VIN OR NUMBER	PART NAME AND VIN OR NUMBER
<b>SCHOOL BUS REGISTRATION</b>	
<p>If applying for school bus registration, I certify that the use of this vehicle meets the requirements for school buses or school activity vehicles as provided in ORS Chapter 820, or by rules adopted by the Oregon Department of Education or State Board of Higher Education, or an Oregon university governing board.</p> <ul style="list-style-type: none"> <li>● School buses or school activity vehicles used exclusively in transporting students to or from any school or authorized school activity or function, including extracurricular activities, and to or from points designated by school, are registered with school bus plates or publicly owned plates, whichever is applicable.</li> <li>● School buses or school activity vehicles not used exclusively in the transportation of students are registered with bus or permanent fleet plates.</li> </ul>	
SCHOOL DISTRICT NAME(S)	
<b>COMMERCIAL VEHICLE - DRUG AND ALCOHOL TESTING CERTIFICATION</b>	
<p>↓ DMV USE ONLY ↓</p>	<p>If this is a commercial vehicle, I am knowledgeable of the applicable federal motor carrier safety regulations and hazardous materials regulations or compatible state regulations.</p> <p>If this vehicle is registered with truck (T) plates, I certify that: I have an in-house drug and alcohol testing program that meets the federal requirements; or I am a member of a consortium that provides testing that meets the federal requirements; or I am exempt from the above requirements.</p> <p>The name(s) of person(s) operating the consortium: _____</p>