

DEPARTMENT OF TRANSPORTATION  
DRIVER AND MOTOR VEHICLE SERVICES  
1905 LANA AVE NE, SALEM OREGON 97314**Application for Registration,  
Renewal, Replacement  
or Transfer of Plates  
and/or Stickers**

REMARKS: (OFFICE USE ONLY)

**Complete all applicable areas. MAIL TO: DMV, 1905 Lana Ave NE, Salem OR 97314; or take to any DMV office.**VEHICLE  
INFORMATION

①

VEHICLE IDENTIFICATION NUMBER (VIN)

OREGON TITLE #

②

PRESENT OREGON PLATE #

YEAR

MAKE

STYLE

EQUIPMENT #

WEIGHT / LENGTH

GVWR

③

SPECIAL PLATES

FARM ID #

FLEET ACCOUNT #

☐ GAS  
☐ ELECTRIC☐ DIESEL  
☐ PROPANE☐ HYBRID  
☐ NATURAL GAS☐ PLUG-IN HYBRID  
☐ OTHER:☐ FLEX-FUEL**This application cannot be used to change or correct the name(s) shown on the title or to change ownership.**Complete Line 4 with the owner whose address will be used for all DMV mail regarding this vehicle. List additional owners on Lines 7 and 8. **(This in no way determines a priority of ownership.)** If any owner listed uses an agency address on DMV records, that owner must be shown on Line 4. **See reverse for more information.**OWNER  
or LESSEE / ADDRESS

④

PRINT FULL LEGAL NAME: **LAST, FIRST, MIDDLE** OF (check one)☐ OWNER

OR

☐ LESSEE

ODL / ID / CUSTOMER #

DATE OF BIRTH

⑤

RESIDENCE / BUSINESS ADDRESS - (Address will be used to update your ODL / ID Card)

MAILING ADDRESS - (If different from residence)

⑥

CITY, STATE, ZIP CODE

COUNTY OF RESIDENCE

CITY, STATE, ZIP CODE

COUNTY OF MAILING

⑦

JOINT OWNER OR LESSEE - PRINT FULL LEGAL NAME: **LAST, FIRST, MIDDLE** (See "Address Change" on reverse)

ODL / ID / CUSTOMER #

DATE OF BIRTH

⑧

JOINT OWNER OR LESSEE - PRINT FULL LEGAL NAME: **LAST, FIRST, MIDDLE** (See "Address Change" on reverse)

ODL / ID / CUSTOMER #

DATE OF BIRTH

⑨

ONE-TIME MAILING ADDRESS (For this transaction only - address will not show on your customer record)

VEHICLE ADDRESS - (Location of vehicle if different from residence)

⑩

CITY, STATE, ZIP CODE

CITY, STATE, ZIP CODE

COUNTY (of vehicle address or use)

**By signing this application, I certify:**

- to one of the following: 1) If this application includes registration, and this motor vehicle is subject to the 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, this vehicle is covered by the motor vehicle liability insurance policy listed below.

⑪

INSURANCE COMPANY (not agent)

POLICY #

- My place of domicile (home) is in Oregon or I am otherwise eligible or required to register this vehicle under Oregon law. (ORS 803.200, ORS 803.350, and ORS 803.360).
- If this is initial registration of a tow/recovery vehicle, or initial registration or renewal of a manufactured structure toter, farm, or charitable/non-profit, the vehicle and its use qualify for special registration and conform to the law.
- All information on this form is true and correct and agree with all applicable statements on the front and back of this form. Under Oregon law, it is a crime to knowingly make any false statement on an application for registration (ORS 803.375). This offense is a Class A misdemeanor and is punishable by a jail sentence of up to one year, a fine of up to \$6,250, or both.

CERTIFICATIONS

SIGNATURES

⑫

SIGNATURE OF OWNER AS SHOWN ABOVE

DATE

TELEPHONE #

**X**

( )

⑬

SIGNATURE OF JOINT OWNER AS SHOWN ABOVE

DATE

TELEPHONE #

**X**

( )

ADDITIONAL  
INFORMATION

⑭

**Transaction Type:**

- ☐ REGISTRATION / RENEWAL  
☐ REPLACEMENT PLATE(S)  
☐ DUPLICATE PLATE(S)\* ☐ ONE ☐ TWO  
☐ REPLACEMENT STICKER(S)  
☐ REPLACEMENT REG. CARD  
☐ PLATE TRANSFER: Plate # \_\_\_\_\_

\*You can get a duplicate of one or both plates assigned to your vehicle if DMV is currently issuing the design and type. Mark ONE or TWO above.

**Passenger Vehicle Plate Type:**

- ☐ CRATER LAKE ☐ CULTURAL ☐ GRAY WHALE ☐ OSU BEAVERS  
☐ PACIFIC WONDERLAND ☐ POLLINATOR ☐ SALMON ☐ SMOKEY BEAR  
☐ TRAIL BLAZERS ☐ TREE ☐ UO DUCKS ☐ WILDLIFE ☐ WINE COUNTRY  
☐ ZOO ☐ OTHER: \_\_\_\_\_ ☐ GROUP: \_\_\_\_\_

☐ \*CUSTOM PLATE: \_\_\_\_\_

\*You must complete and attach a Custom Plate Application, Form 735-205.

**REMARKS:**

## FORM INFORMATION

DMV links all records together based on your customer number. Always use your customer number and the same name with DMV.

**Individual Customer Number:** Your customer number is your Oregon driver license (ODL), Identification card (ID) or instruction permit number if you have one. If you do not have an Oregon customer number, one will be assigned to you.

**Business Customer Number:** If you know your business customer number, list it on the application.

**One-time Mailing Address:** Where you want the registration document mailed if different than residence or mailing.

**Vehicle Address:** Where vehicle is primarily housed or dispatched from if different address than the residence or business.

**Address Change:** Only the address listed on Line 5 for the owner will be changed if it is different than DMV records. DMV will update your vehicle and driver record. Additional owners can change their address online at [DMV2U.Oregon.gov](https://dmv2u.oregon.gov).

**Work Address:** If an owner has a work/public agency address on file with DMV and wants that address to be used for the vehicle record, that person must be listed on Line 4 and the work address listed on Lines 5 and 6.

**COMMERCIAL VEHICLE - DRUG AND ALCOHOL TESTING CERTIFICATION**

**I certify:**

Commercial vehicle: I know the applicable federal motor carrier safety regulations and hazardous materials regulations or compatible state regulations.

Registered with truck (T) plates. 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 federal requirements; or I am exempt from the above requirements.

Name of person(s) operating consortium: \_\_\_\_\_

## MILITARY BENEFIT INFORMATION REQUEST

I am a member or veteran of a uniformed service and want DMV to send my name and address to the Oregon Department of Veterans' Affairs so I can get benefit information.

Name(s): \_\_\_\_\_

## DEAF OR HARD OF HEARING NOTATION ON VEHICLE REGISTRATION

☐ Add a Deaf/Hard of Hearing note to my registration card, to show that someone driving my vehicle may be deaf or hard of hearing.

**NOTES**

[illegible]