

**MOTOR VEHICLE
ANNUAL REPORT/APPLICATION
CHAPTER 31-7**

PLEASE PRINT

NAME:	
RESIDENCY ADDRESS:	
Telephone #:	

1.	MAKE:	
2.	MODEL:	
3.	YEAR	
4.	VIN #	
5.	REGISTRATION:	
6.	REGISTERED OWNER:	
7.	REGISTERED ADDRESS	
7.	PROOF OF INSURANCE:	
8.	STATE OF REGISTRATION:	

REASON FOR REGISTERING THE VEHICLE IN ANOTHER STATE:

Additional corroborating information may be requested

Signature:

DATE:

RESERVED FOR OFFICIAL USE

APPLICATION FOR EXEMPTION :

IS APPROVED

NOT APPROVED

REASON:

ASSESSOR: _____ **DATE:** _____