

APPLICATION TO TITLE/REG. A VE
MINNESOTA DEPARTMENT OF PUBLIC
Driver and Vehicle Service.
445 Minnesota St. Suite 160, St. Paul, MN 55101



M SA 88951ST

YEAR

FOR VALIDATION AND OFFICE USE ONLY

PAID

JUN 02 2004

DEPUTY #160

CHANGE OF CLASS

NON-NEGOTIABLE REGISTRATION RECEIPT (CARD) AND CAB CARD
THIS COPY WHEN VALIDATED, STAMPED ON THE UPPER RIGHT
CORNER BY A DEPUTY REGISTRAR OR THE CENTRAL OFFICE, WILL
SERVE AS EVIDENCE OF THIS RECEIPT HAS BEEN ASSIGNED TO
THE OWNER FOR USE ONLY ON THE VEHICLE DESCRIBED.

5128

Title Only _____
Registration Only _____

YEAR VALIDATION STICKER NUMBER	YEAR
WEIGHT STICKER NUMBER/MOTORCYCLE ENGINE #	YEAR

A
PURCHASER(S)
OWNER(S)
MUST
COMPLETE

Vehicle
information

PURCHASER(S)
OWNER(S)
information

DATE OF PURCHASE	NEW <input type="checkbox"/> USED <input type="checkbox"/>	PREVIOUS PLATE NUMBER	YEAR	EXPIRATION DATE	MONTH	YEAR
MODEL YEAR	MAKE	BODY/MODEL TYPE	COLOR CODE	BODY	ROOF	
VEHICLE IDENTIFICATION NUMBER						
11U1YVS12S38TP033016						
LAST, FIRST, AND MIDDLE NAME				DRIVER LICENSE NO. / DEALER NO.		DATE OF BIRTH
TRANSPORT DESIGNS INC						
ADDITIONAL PURCHASER(S) OWNER(S) LAST, FIRST, AND MIDDLE				DRIVERS LICENSE		DATE OF BIRTH

You may disclose my personal information for any use in response to requests for my individual driver or motor vehicle records.
 You may disclose my personal information for bulk distribution for surveys, marketing or solicitations.

STREET ADDRESS	CITY	COUNTY	STATE	ZIP CODE
P.O. BOX 43	SAVAGE	SCOTT	MINN.	55378

MINNESOTA DEPARTMENT OF PUBLIC SAFETY
MOTOR VEHICLE REGISTRATION CARD
445 MINNESOTA ST., ST. PAUL, MINN. 55101

5129

REGISTRATION AND CAB CAR

First Class
U.S. Postage
PAID
Permit No. 171
St. Paul, MN

89003ST PLATE NO.	G3280S217 TITLE NUMBER	NONE SEC. AGREEMENT
NONE PLATE EXPIRES	NONE TAX	
NONE TAX BASE	1UYVS253XTP033017 V.I.N.	
UTIL MAKE	96 MOD. YR.	TYPE
NONE STICKER NO.	FILE NO.	N23 SAVAGE
PT 0375 PREV. PLATE NO.		

**PERMANENT
89003ST Z**

**TRANSPORT DESIGNS INC
PO BX 43
MN 55378-0043**