

Motor Vehicle

Out of State Dealer Purchase

Required Documents:

- Dealer packet: all original documents provided by the dealership with the title including: bill of sale/invoice, loan documents (if vehicle is being financed), and sales tax information.
 - Please do not separate this packet**
- Paperwork Cover Sheet (attached)
 - Front and back completed in its entirety
- Application for Title/Registration DR 2395 (attached)
 - Please note this is a generic form and not all fields will apply to you, complete vehicle information and customer related fields.
 - Witness signature is required
 - Back page 'Joint Tenancy with Rights of Survivorship Acknowledgment' form is required to be completed by all buyers, if more than one.
- VIN Verification DR 2698 (attached)
 - Must be completed in its entirety by one of the following agencies: emissions station, Colorado dealer, Colorado law enforcement.
- Enhanced emission test required for the following:
 - Passenger Vehicles, Buses, Light trucks, Recreational trucks, GVW trucks, GVW tractors, Motor homes
 - Gas Vehicles 6 years and older
 - Locations: aircarecolorado.com
 - Diesel Vehicles 4 years and older
 - Locations: [Diesel Emissions Centers](#)
- A certified weight slip is required for any truck, cargo van, or motor home weighing between 4,501 lbs 10,000 lbs or trailer weighing more than 1,900 lbs
 - If empty weight is listed on the title/registration, weight slip not required.
- Proof of insurance
 - Must be current and for the vehicle you are registering

Drop off paperwork in an envelope with your name on the front at one of our three locations:

- 9350 Heritage Hills Cir. Lone Tree, CO 80124
- 2223 W Wildcat Reserve Pkwy #G-1 Highlands Ranch, CO 80129
- 301 Wilcox St Castle Rock, CO 80104

Paperwork Cover Sheet

A Motor Vehicle Specialist will contact you if necessary.

Full Name: _____ **Today's Date:** _____

Phone Number(s): _____ **Address:** _____

Email Address: _____ **Vehicle Plate Number:** _____

Vehicle ID Number (VIN): _____ **Vehicle Title Number:** _____

If applicable, select from the options below:

- Reuse plates and credit _____ (plate#)
- New plates, no credit
- New plates, need credit from _____ (plate #)
- Plate Type Selection: Regular Other _____ (Certain plate types have additional requirements, fees)

What service do you need to complete?

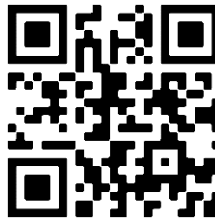
- Registration Renewal (Complete online at mydmv.colorado.gov)
- Disability Services (Placards/Plates) (Complete online at mydmv.colorado.gov)
- Private Party Purchase
- Colorado Dealer Purchase (Complete online at mydmv.colorado.gov)
- Out of State Dealer Purchase
- New Colorado Resident Vehicle Registration
- Title Only Transaction – Duplicate Title, Lien Release, Name Change, Add/remove Name from Title
- Driver's License Transaction (Castle Rock location only)
- Other Reason: _____

For all transactions: The back of this sheet must be completed, signed, and witnessed



Before you drop your paperwork in the box:

Visit DouglasDrives.com or scan for list of required documents:



For internal Douglas County office use only:

<input type="checkbox"/> Hold for Payment	<input type="checkbox"/> Hold for Documents:			<input type="checkbox"/> Rejected
<input type="checkbox"/> Copy of ID Provided <input type="checkbox"/> Current Insurance Verified <input type="checkbox"/> DR 2482 SVID Included				
	Phone Call	Voicemail	Email	Letter
Contact #1 Date/Time				
Contact #2 Date/Time				
Contact #3 Date/Time				
<input type="checkbox"/> Appointment	<input type="checkbox"/> Pick Up	Date:	Time:	Office:

Notes:

SUPPLEMENTAL SECURE AND VERIFIABLE IDENTIFICATION INFORMATION AND ATTESTATION CLAUSE

ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT

This form may be used as an attachment to existing forms inventory which does not contain the secure and verifiable identification information or attestation. Please attach this completed form to the document(s) being presented for Title and/or Registration.

SECURE AND VERIFIABLE IDENTIFICATION OF		
Name as it Appears on Identification		
Agency (If Applicable)		
Identification Information (for acceptable forms of ID please see form DR 2841)		
<input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other _____		
ID #	Expires	DOB
This section to be used with DR 2219 Persons with Disabilities Parking Privileges Application. Identification shown above belongs to:		
<input type="checkbox"/> Individual (Placard holder) <input type="checkbox"/> Guardian <input type="checkbox"/> Parent <input type="checkbox"/> Business		
* Affidavit of one in the same is required if the name on ID differs in any way from name on title assignment.		
* _____		
and _____		
ARE ONE IN THE SAME <input type="checkbox"/> PERSON <input type="checkbox"/> COMPANY		
I, certify under penalty of perjury in the second degree, that the above statements are true and accurate to the best of my knowledge.		
Signature		
The undersigned witness affirms that the identification described above was presented to me.		
Witness Printed Name		
Witness Signature	Date	

Application For Title and/or Registration

C.R.S. 42-3-105, 42-3-304(25)(c), 42-6-107, 42-6-116, 42-6-117

Any Alteration or Erasure may Void this Document

Vehicle Identification Number (VIN) <input style="width: 100%;" type="text"/>										Fuel Type*: *If electric, is it plug-in electric? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Year	Make	Body	Model	Color	CWT	Off-Highway Vehicle <input type="checkbox"/> Yes <input type="checkbox"/> No		Snowmobile <input type="checkbox"/> Yes <input type="checkbox"/> No			
Dealer #	Date Purchased		Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	MSRP	Size (W x L)		Bus Cap. <input type="checkbox"/> Adult <input type="checkbox"/> Juvenile				
Legal Name(s) as it Appears on Identification* and Address of Owner(s) or Entity <input type="checkbox"/> DR 2421 Attached				Lease Buy-Out <input type="checkbox"/> Yes <input type="checkbox"/> No	Legal Name(s) as it Appears on Identification and Physical Address of Lessee						
					Indicate Alternate Address Here if The Registration Renewal Should be Sent to a Different Address						
First Lienholder Name and Address or ELT E- Number					Second Lienholder Name and Address**						
Lien Amount <input style="width: 100%;" type="text"/>					Lien Amount <input style="width: 100%;" type="text"/>						
Indicate Alternate Address Here if The Title Should be Sent to a Different Lienholder Address					Indicate Alternate Address Here if The Title Should be Sent to a Different Lienholder Address						
<p>*DR 2421 Statement of One in the Same is required when the owner's name on the Secure and Verifiable ID differs from the owner's name on the application/title. **If more than two lienholders, please attach separate documentation.</p> <p>Motor vehicle insurance or operator's coverage is compulsory in the State of Colorado. Proof of insurance is required prior to issuance of a registration. Non-compliance with this requirement is a misdemeanor traffic offense. Pursuant to 42-4-1409, C.R.S., the penalties for failure to have motor vehicle insurance coverage is a Class 1 Misdemeanor Traffic Offense punishable by a mandatory minimum ten days imprisonment, or three hundred dollar fine, or both or a mandatory maximum one year imprisonment, or one thousand dollar fine, or both shall be imposed by section 42-4-1701(3)(a)(II)(A), C.R.S.; and</p> <p>a. A minimum mandatory fine of not less than five hundred dollars or greater if imposed by the court; and</p> <p>b. At the discretion of the court, not less than forty hours of community service, subject to the provisions of section 18-1.3-507, C.R.S.</p> <p>c. A second or subsequent conviction within a period of five years following a prior conviction, a minimum mandatory fine of not less than one thousand dollars.</p> <p>After obtaining a registration, you will be required to sign an affirmation clause indicating compliance with insurance requirements.</p> <p>Unless a person waives his or her confidentiality, the information contained in the person's motor vehicle record shall not be used for any purpose other than a purpose authorized by law, pursuant to C.R.S. 42-2-121 (4)(a).</p> <p>I certify, under penalty of perjury in the second degree, that the above information is true and accurate to the best of my knowledge.</p>											
Owner or Agent Signature										Date	
Printed name of Owner/Agent as it appears on Identification:											
Secure and Verifiable ID of Owner/Agent: <input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other:											
ID#				Expires				DOB			
The undersigned witness affirms that the named owner of the vehicle identified in this document presented the identification described above.											
Witness Signature								Date			
County Use Only (Dealers/Lienholders: Do Not Write Below this Line)											
Previous Title Number					Title Number						
Date Accepted	Purchase Price		Odometer Reading & Indicator		GVWR		Fleet #		Unit #		
First Lienholder #					Second Lienholder #						
Lien File No.	Lien Amount	Maturity Date	Date of Lien		Lien File No.	Lien Amount	Maturity Date	Date of Lien			
Taxes Paid:					Filing Fees:						
Additional Comments:											
										Clerks Initials _____	

State Of Colorado

Joint Tenancy with Rights of Survivorship Acknowledgement of Intent

C.R.S. 38-11-101

Any Alteration or Erasure may Void this Document

To create joint tenancy with rights of survivorship, there must be specific language declaring such intent, signed under penalty of perjury in the second degree by all owners. This form is only applicable to multiple owners.

Joint Tenancy with rights of Survivorship is defined as: A form of legal co-ownership of property (also known as survivorship). At the death of one co-owner, the surviving co-owner becomes sole owner of the property. Transfer of ownership requires copy of death certificate and signature of survivor.

Tenancy in Common is defined as: The equal or unequal holding of property by two or more persons. At the death of one co-owner, the deceased share of the property goes to his/her estate and is to be divided according to his/her will or the law in the absence of a will. Transfer of ownership requires documents appointing a personal representative for the decedent.

Vehicle Identification Number	Year	Make.	Model
If any owner chooses Tenancy in Common or if neither box is checked; the Colorado Certificate of Title will be issued as Tenancy in Common.			
Owner One	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common </div> <p style="font-size: small; margin-top: 5px;">Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.</p>		
	Owners Signature		Date
Owner Two	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common </div> <p style="font-size: small; margin-top: 5px;">Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.</p>		
	Owners Signature		Date
Owner Three	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common </div> <p style="font-size: small; margin-top: 5px;">Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.</p>		
	Owners Signature		Date
Owner Four	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common </div> <p style="font-size: small; margin-top: 5px;">Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.</p>		
	Owners Signature		Date

VERIFICATION OF VEHICLE IDENTIFICATION NUMBER

C.R.S. 24-32-3323, 38-29-122, 42-3-105(I)(c), 42-6-107(I)(b)
ANY ALTERATION OR ERASURE MAY VOID THIS DOCUMENT

Type of Vehicle ➔

<input type="checkbox"/> Passenger	<input type="checkbox"/> Tractor	<input type="checkbox"/> Motor Home	<input type="checkbox"/> Motorcycle
<input type="checkbox"/> SUV	<input type="checkbox"/> Bus	<input type="checkbox"/> Special Mobile Machinery	<input type="checkbox"/> Off-Highway Vehicle
<input type="checkbox"/> Truck	<input type="checkbox"/> Trailer	<input type="checkbox"/> Manufactured Home	

VEHICLE INFORMATION													
Vehicle Identification Number (VIN)													
Year	Make			Body			Model			Width		Length	
Color		CWT			GVWR			Print Fuel Type					
License Plate Number							State			Expiration Date			
Temporary Tag Number							State			Expiration Date			

Additional Vehicle Identification Number													
<input type="checkbox"/> Motor Number _____ <input type="checkbox"/> Coach Number _____													
Reason for Inspection:				Verified by:									
<input type="checkbox"/> Out of State <input type="checkbox"/> Title correction <input type="checkbox"/> Other (Explain) _____				<input type="checkbox"/> Manufactured Home Dealer <input type="checkbox"/> Licensed Colorado Dealer Dealer Number _____ <input type="checkbox"/> Licensed Colorado Emission Station Number _____				<input type="checkbox"/> County Assessor (at their discretion) <input type="checkbox"/> County Clerk (at their discretion) <input type="checkbox"/> Colorado Law Enforcement <input type="checkbox"/> Other _____ *					
Name of Business or Agency													
Address							City			State		ZIP Code	
I certify, under penalty of perjury in the second degree, that I have completed a physical inspection of the vehicle/manufactured home described above and the information is true and correct to the best of my knowledge.													
Printed First and Last Name of Inspector										Date			
Signature of Inspector										Title			

COLORADO DEALER STATEMENT CONCERNING AN OUT OF STATE VEHICLE C.R.S. 42-6-119(3)

Dealer	Dealer Number
I certify, under penalty of perjury in the second degree, that the vehicle as described above met the following conditions at the time of sale: <ul style="list-style-type: none"> Was free and clear of all liens and encumbrances, Was not stolen, The dealership has a sure and adequate title to the vehicle; and The dealership has the right and authority to sell and transfer this vehicle. 	
Dealer Agent (printed name)	
Dealer Agent Signature	Date

(*Out of state law enforcement, military police or commanding officer)