

STATEMENT OF FACTS

Complete the appropriate section(s) in full (including vehicle description) and sign Section H.

LICENSE PLATE/CF NUMBER	VEHICLE/VESSEL ID NUMBER	YEAR/MAKE
A. STATEMENT FOR USE TAX EXEN	IPTION	
minors related by blood or adoption). Addition or deletion of family member Gift (does not include vehicles traded Court Order Inheritance NOTE: The Use Tax Exemption cannot	t, child, grandparent, grandchild, spouse (spouse, domestic partner, parent[s], sor between individuals, transfer of contract	s or other valuable consideration). ng transferred was purchased from an
The current market value is: \$	·	
B. STATEMENT FOR SMOG EXEMP	TION	
 It is located outside the State of Calife It is being transferred from/between: □ The parent, grandparent, child, g Family Code §297) of the transfe □ A sole proprietorship to the propr □ Companies whose principal busin □ Lessor and lessee of vehicle, and 	ned within the last 90 days. diesel Other ornia. (Exception: Nevada and Mexico) randchild, brother, sister, spouse, or don ree.* dieter as owner.* ness is leasing vehicles. There is no char of the change in the lessee or operator of the stered owner(s).*	nestic partner (as defined in nege in lessee or operator.* the vehicle.*
C. STATEMENT FOR TRANSFER ON		
highway to cause registration fees to be	It has not been driven, moved, towed, come due. It was not transported over a	way. I am applying for a: or left standing on any California public any California public highway or operated tion will be obtained before the vehicle is
D. WINDOW DECAL FOR WHEELCH	AIR LIFT OR WHEELCHAIR CARRIER	
Enter your Disabled Person License Plate number below:	, or Disabled Veteran License Plate, or Pe	rmanent Disabled Person Parking Placard
DISABLED PERSON PLATE	DISABLED VETERAN PLATE	PERMANENT DISABLED PERSON PLACARD
The vehicle to which my Window Decal w	vill be affixed is: VEHICLE MAKE	VEHICLE ID NUMBER
Mail to:		
ADDRESS		
CITY		STATE ZIP

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E. STATEMENT FOR VEHICLE BODY CHANGE (OWNERSHIP CERTIFICATE REQUIRED)			
The current market value of the vehicle	e or vessel is: \$		
Changes were made at a cost of \$	on this date	·	
Motive Power changed from	apply: (Public Weighmaster Certi to to to	ficate is required. Exception: Trailers)	
F. NAME STATEMENT (OWNERSHIP CERTIFICATE REQUIRED)			
Please print			
□ I,	and	are one and the same person.	
☐ My name is misspelled. Please corn	ect it to:		
☐ I am changing my name from	to		
G. STATEMENT OF FACTS			
I, the undersigned, state:			
H. APPLICANT'S SIGNATURE			
I certify (or declare) under penalty of parties.	perjury under the laws of the State of Califo	rnıa that the foregoing is true and	
PRINTED LAST NAME FIRST	NAME MIDDLE NAME	DAYTIME PHONE NUMBER	
SIGNATURE		DATE	