

SECTION 1 — TRAILER DESCRIPTION

PERMANENT TRAILER IDENTIFICATION (PTI) CERTIFICATION

USE THIS SIDE TO REQUEST A CERTIFICATE OF TITLE

This form cannot be used to replace a title that is lost, stolen, not received, or illegible/mutilated. Use Application for Replacement Title (REG 227).

- If there is no legal owner, and you would like to receive a Certificate of Title, please complete Sections 1 and 2 below.
- The Department will issue a Permanent Trailer Identification Card and maintain an electronic record of ownership, whether a Certificate of Title is requested or not.
- If a Certificate of Title is not requested, a Bill of Sale can be used for transfer of ownership. However, if a physical Certificate of Title has been issued, it must be used upon transfer of ownership.
- A trailer being titled with a legal owner (bank, finance company, etc.) will automatically be issued a Certificate of Title (A PTI title fee will apply).

PTI IDENTIFICATION PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	YEAR/MAKE
SECTION 2. — CERTIFICATIO	N I request a Certificate of Title (A PTI tit	tie fee will apply)
I certify (or declare) under per	nalty of perjury under the laws of the Stat	e of California that the foregoing is true
and correct.		
Owner's signature required.		
OWNER'S SIGNATURE	DATE	DAYTIME TELEPHONE NUMBER
X		<i>(</i>)

REG 4017 (REV. 1/2022) **WWW**

PERMANENT TRAILER IDEN Certificate of Title (Current Owner of Transfer without Certificate of Title	completes Side A. To red (Seller completes Sect	, quest a Replacement titl ions 1 and 2, Buyer com	le, use form REG 22 pletes Sections 4 the	rough 7, as n)
Addition of Legal Owner Without Co	EIDENTIFICATION NUMBER	dd a legal owner, Section	YEAR/MAKE	completed.)	
1. TRAILED OWNER(S) OF PEOORE						
1. TRAILER OWNER(S) OF RECORD TRUE FULL NAME (LAST, FIRST, MIDDLE OR BUSINESS N	AME)	TRUE FULL NAME (LAST, FIF	RST. MIDDLE)			
THE FOLLOWING (END), FINE I, MIDDLE ON DOOMESON	, in 2)	THOS FORE TO THE CONTRACT	ioi, wibble)			
PHYSICAL ADDRESS (INCLUDE ST., AVE., RD., CT., ETC.)	APT./SPACE/STE.#	CITY	STATE	ZIP CODE		
MAILINGADDRESS (IF DIFFERENT FROM PHYSICAL ADDR	RESS) APT./SPACE/STE.#	CITY	STATE	ZIP CODE		
2. TRAILER OWNER(S) OF RECORD		ISHIP				
I/We release ownership in the described SIGNATURE OF OWNER	DATE	SIGNATURE OF OWNER		DATE		
X	Ditte	X		D/II E		
3. TRAILER OWNER(S) OF RECORD	ADDING LEGAL OWN					
I/We release security interest in the desc		LIT OILLI				
SIGNATURE OF OWNER	DATE	SIGNATURE OF OWNER		DATE		
X		X				
4. NEW TRAILER OWNER(S) - Comp	lete transfer within 10		sion of trailer			
PURCHASE PRICE/MARKET VALUE (IF GIFT OR TR			EQUIPMENT NUMBER (C	OPTIONAL)		
TRUE FULL NAME (LAST, FIRST, MIDDLE OR BUSINESS N	AME)		DRIVER LICENSE/ID CAF	RD NUMBER		
TRUE FULL NAME (LAST, FIRST, MIDDLE)			DRIVER LICENSE/ID CAF	RD NUMBER		
☐ AND*						
PHYSICAL ADDRESS (INCLUDE ST., AVE., RD., CT., ETC.)	APT./SPACE/STE.#	CITY	STATE	ZIP CODE		
MAILING ADDRESS (IF DIFFERENT FROM PHYSICAL ABO	OVE) APT./SPACE/STE. #	CITY	STATE	ZIP CODE		
I certify (or declare) under penalty of that the owner mailing address is valid	perjury under the laws d, existing, and an acci	s of the State of Californ urate mailing address. I	nia that the foregoid	ng is true ar	nd corr	ect and
mailing address pursuant to Section 1	808.21 of the Vehicle C	Code.		<u>-</u>		
SIGNATURE(S) OF ALL NEW OWNER(S)		DATE	DAYTIME TELEPHONE N	UMBER		
X						
v		DATE	DAYTIME TELEPHONE NUMBER			
X	I. ((1.0.111)					
5. NEW LEGAL OWNER (If no legal of		2) ABOVE	ELECTRONIC LIENTIOLD	ED ID NILIMBED		
NAME OF NEW LEGAL OWNER - DO NOT ENTER NAME OF NEW REGISTERED OWNER(S		S) ABOVE	ELECTRONIC LIENHOLDER ID NUMBER			
STREET OR P.O. BOX ADDRESS	APT./SPACE/STE.#	CITY	ELT# STATE	ZIP CODE		
STREET ON F.O. BOX ADDRESS	AF 1./3FACE/31 E. #	OTT	SIAIE	ZIF CODE		
C LEACED VEHICLES						
6. LEASED VEHICLES LESSEE ADDRESS (IF DIFFERENT FROM OWNER ADDRESS)	ESS ABOVE)					
7. DEALER'S RELEASE OF ACQUIRE	D VEHICI E					
NAME OF BUYER	.D VLINOLL		DATE SOLD			
NAME OF DEALERSHIP	DEALER NUMBER		R/S NUMBER			
				1 1		1
SIGNATURE OF DEALER AGENT	PRINTED NAME OF DEAL	ER AGENT	SALESPERSON NUMBER	 ?		
X				1 1		1
NAME OF BUYER			DATE SOLD			
NAME OF DEALERSHIP	ME OF DEALERSHIP DEALER NUMBER		R/S NUMBER			
SIGNATURE OF DEALER AGENT	PRINTED NAME OF DEAL	ER AGENT	SALESPERSON NUMBER	3		
X						
*Upon transfer of ownership, co-owners signature of only one owner.	joined by "AND" requir	re the signature of each	owner; co-owners	joined by "O	R" requ	uire the