

## Exercise 4

Name: Rahul Goel

Reg no: RA1911030010094

Batch: CSE-O2

CONVERT THE FOLLOWING MANUAL FORM INTO DIGITAL MODE USING TKINTER

REGISTRATION INFORMATION			
Registration Period: (check one) <input type="checkbox"/> One Year <input type="checkbox"/> Two Years (\$2 discount applies) <input type="checkbox"/> Three Years (\$3 discount applies) (not available for vehicles subject to emissions testing)			
Registration Type: (check one) <input type="checkbox"/> Original <input type="checkbox"/> Renewal <input type="checkbox"/> Private <input type="checkbox"/> Reissue (Plates & Decals) <input type="checkbox"/> Reissue (Decals Only) <input type="checkbox"/> Rental Vehicle <input type="checkbox"/> Transfer License Plate Number: <input type="text"/> ENTER PLATE NUM See Reissue Plates below under Plate Information. <input type="checkbox"/> For Hire (complete "For Hire Information" section) <input type="checkbox"/> Ridesharing (Vanpool) (Cannot exceed 16 passengers including driver.) Seating Capacity <input type="text"/> <input type="checkbox"/> Amateur Radio Operator Call Letters - Specify letters: <input type="text"/> <input type="checkbox"/> Other: <input type="text"/> SPECIFY			
OWNER INFORMATION			
OWNER'S FULL LEGAL NAME (last, first, mi, suffix) OR BUSINESS NAME (if business owned)		TELEPHONE NUMBER ( )	DMV CUSTOMER NUMBER / FEIN / SSN
CO-OWNER'S FULL LEGAL NAME (last, first, mi, suffix)		TELEPHONE NUMBER ( )	DMV CUSTOMER NUMBER / FEIN / SSN
NOTE: Owners (and Lessees if applicable) MUST provide their residence/home/business address where requested, this address can not be a P.O. Box. You must complete form ISD-01 if you would like your address(es) updated.			RESIDENCE/BUSINESS JURISDICTION
OWNER'S RESIDENCE/HOME/BUSINESS ADDRESS (Apt # if applicable)	CITY	STATE	ZIP CODE
CO-OWNER'S RESIDENCE/HOME/BUSINESS ADDRESS (Apt # if applicable)	CITY	STATE	ZIP CODE
OWNER EMAIL ADDRESS		CO-OWNER EMAIL ADDRESS	
ADDITIONAL INFORMATION			
LOCATION WHERE VEHICLE IS PRINCIPALLY GARAGED <input type="checkbox"/> CITY <input type="checkbox"/> COUNTY <input type="checkbox"/> TOWN OF <input type="text"/>		IF NEW LOCATION ENTER DATE CHANGED <input type="text"/>	Are any of the owners/lessees on active military duty or service? <input type="checkbox"/> YES <input type="checkbox"/> NO
IF YOU WOULD LIKE YOUR REGISTRATION RENEWALS SENT TO AN ADDRESS OTHER THAN YOUR RESIDENCE/BUSINESS ADDRESS, ENTER IT BELOW.			
REGISTRATION MAILING ADDRESS - OPTIONAL		CITY	STATE ZIP CODE

from tkinter import \*

root=Tk()

#title

root.title("REGISTRATION INFORMATION")

#MAIN HEADING

Label(root,text="REGISTRATION INFORMATION",bg="grey",fg="black",font=("Arial Bold",25)).pack(fill=X)

#Setting window size

root.geometry("500x500")

```
l1=Label(root,text="Registration Period: (check one)",fg="black",font=("Arial Bold",15))
```

```
l1.place(x=0,y=50)
```

```
#Adding checkbox
```

```
ch1=Checkbox(root,text="One Year",fg="black",font=10)
```

```
ch1.place(x=350,y=50)
```

```
ch2=Checkbox(root,text="Two Years($2 discount applies)",fg="black",font=10)
```

```
ch2.place(x=500,y=50)
```

```
ch3=Checkbox(root,text="Three Years($3 discount applies)",fg="black",font=10)
```

```
ch3.place(x=850,y=50)
```

```
l2=Label(root,text="(not available for vehicles subject to emissions testing)",font=10)
```

```
l2.place(x=890,y=80)
```

```
l3=Label(root,text="Registration Type:",fg="black",font=("Arial Bold",15))
```

```
l3.place(x=0,y=120)
```

```
ch4=Checkbox(root,text="Original",fg="black",font=10)
```

```
ch4.place(x=350,y=120)
```

```
ch5=Checkbox(root,text="Renewal",fg="black",font=10)
```

```
ch5.place(x=510,y=120)
```

```
ch6=Checkbox(root,text="Private",fg="black",font=10)
```

```
ch6.place(x=840,y=120)
```

```
ch7=Checkbox(root,text="Reissue(Plates and Decals)",fg="black",font=10)
```

```
ch7.place(x=980,y=120)
```

```
Label(root,text="See Reissue Plates below under plate  
information",fg="black",font=10).place(x=990,y=150)
```

```
ch8=Checkbox(root,text="Reissue(Decals Only)",fg="black",font=10)
```

```
ch8.place(x=0,y=155)
```

```
ch9=Checkbox(root,text="Rental Vehicle",fg="black",font=10)
```

```
ch9.place(x=350,y=155)
```

```

ch10=Checkbutton(root,text="Transfer Plate Number:",fg="black",font=10)
ch10.place(x=510,y=155)
entry = Entry(root,width=20)
entry.place(x=760,y=165)
l4=Label(root,text="ENTER PLATE NUM",fg="black",font=("Arial Bold",10))
l4.place(x=760,y=185)
ch11=Checkbutton(root,text='For Hire(complete "For Hire Information")',fg="black",font=10)
ch11.place(x=0,y=210)
ch12=Checkbutton(root,text='Ridesharing(Cannot excced 16 passengers including
driver)',fg="black",font=5)
ch12.place(x=510,y=210)
l5=Label(root,text="Seating Capacity:",fg="black",font=("Arial Bold",15))
l5.place(x=1100,y=210)
e2=Entry(root)
e2.place(x=1290,y=210)

ch13=Checkbutton(root,text='Amateur Radio Operator call letters-Specify
letters:',fg="black",font=10)
ch13.place(x=0,y=250)
e3=Entry(root)
e3.place(x=495,y=260)
ch14=Checkbutton(root,text='Other:',fg="black",font=10)
ch14.place(x=805,y=250)
e4=Entry(root,width=15)
e4.place(x=900,y=260)
l6=Label(root,text="SPECIFY",fg="black",font=("Arial Bold",13))
l6.place(x=900,y=280)
#SECOND PART
l7=Label(root,text="OWNER INFORMATION",font=("Arial Bold",25),bg="grey",fg="black",)
#l7.pack(fill=X,anchor=CENTER)
l7.place(x=550,y=300)

```

```
l8=Label(root,text="OWNERS FULL NAME(last,first,mid,suffix) OR BUSINESS NAME(if owned business) ",font=("Arial Bold",10),fg="black",)
```

```
l8.place(x=0,y=350)
```

```
l9=Label(root,text="TELEPHONE NUMBER",font=("Arial Bold",10),fg="black",)
```

```
l9.place(x=690,y=350)
```

```
l10=Label(root,text="DMV CUSTOMER NUMBER/FEIN/SSN",font=("Arial Bold",10),fg="black",)
```

```
l10.place(x=1050,y=350)
```

```
e5=Entry(root,width=35,bd=5)
```

```
e5.place(x=0,y=370)
```

```
e6=Entry(root,width=35,bd=5)
```

```
e6.place(x=690,y=370)
```

```
e7=Entry(root,width=35,bd=5)
```

```
e7.place(x=1050,y=370)
```

```
l11=Label(root,text="CO-OWNERS FULL LEGAL NAME(last,first,mid,suffix)",font=("Arial Bold",10),fg="black",)
```

```
l11.place(x=0,y=400)
```

```
l12=Label(root,text="TELEPHONE NUMBER",font=("Arial Bold",10),fg="black",)
```

```
l12.place(x=690,y=400)
```

```
l13=Label(root,text="DMV CUSTOMER NUMBER/FEIN/SSN",font=("Arial Bold",10),fg="black",)
```

```
l13.place(x=1050,y=400)
```

```
e8=Entry(root,width=35,bd=5)
```

```
e8.place(x=0,y=420)
```

```
e9=Entry(root,width=35,bd=5)
```

```
e9.place(x=690,y=420)
```

```
e10=Entry(root,width=35,bd=5)
```

```
e10.place(x=1050,y=420)
```

```
l14=Label(root,text="Owners (and Lesses if applicable)Must provide their residence/home/business address where requested,this address",font=("Arial Bold",10),fg="black",)
```

```
l14.place(x=0,y=450)
```

```
l15=Label(root,text="can not be a P.O box.You Must complete form ISO-01 if you would like your address(es) updated",font=("Arial Bold",10),fg="black",)
```

```
l15.place(x=0,y=470)
```

```
l16=Label(root,text="RESIDENCE/BUSINESS JURISDICTION",font=("Arial  
Bold",10),fg="black",).place(x=1050,y=450)
```

```
e11=Entry(root,width=35,bd=5)
```

```
e11.place(x=1050,y=470)
```

```
l17=Label(root,text="OWNER'S RESIDENCE/BUSINESS JURISDICTION(Apt #if applicable)",font=("Arial  
Bold",10),fg="black",)
```

```
l17.place(x=0,y=490)
```

```
l18=Label(root,text="QTY",font=("Arial Bold",10),fg="black",)
```

```
l18.place(x=600,y=490)
```

```
l19=Label(root,text="STATE",font=("Arial Bold",10),fg="black",)
```

```
l19.place(x=990,y=490)
```

```
l20=Label(root,text="ZIP CODE",font=("Arial Bold",10),fg="black",)
```

```
l20.place(x=1100,y=490)
```

```
e11=Entry(root,width=35,bd=5)
```

```
e11.place(x=0,y=510)
```

```
e12=Entry(root,width=35,bd=5)
```

```
e12.place(x=600,y=510)
```

```
e13=Entry(root,width=15,bd=5)
```

```
e13.place(x=990,y=510)
```

```
e14=Entry(root,width=15,bd=5).place(x=1100,y=510)
```

```
l21=Label(root,text="OWNER'S RESIDENCE/BUSINESS JURISDICTION(Apt #if applicable)",font=("Arial  
Bold",10),fg="black",)
```

```
l21.place(x=0,y=530)
```

```
l22=Label(root,text="QTY",font=("Arial Bold",10),fg="black",)
```

```
l22.place(x=600,y=530)
```

```
l23=Label(root,text="STATE",font=("Arial Bold",10),fg="black",)
```

```
l23.place(x=990,y=530)
```

```
l24=Label(root,text="ZIP CODE",font=("Arial Bold",10),fg="black",)
```

```
l24.place(x=1100,y=530)
```

```
e11=Entry(root,width=35,bd=5)
```

```
e11.place(x=0,y=550)
e12=Entry(root,width=35,bd=5)
e12.place(x=600,y=550)
e13=Entry(root,width=15,bd=5)
e13.place(x=990,y=550)
e14=Entry(root,width=15,bd=5).place(x=1100,y=550)
```

#### #SECOND PART

```
l25=Label(root,text="OWNER EMAIL ADDRESS",font=("Arial Bold",10),fg="black",)
l25.place(x=0,y=580)
l26=Label(root,text="CO-OWNERS EMAIL ADDRESS",font=("Arial Bold",10),fg="black",)
l26.place(x=790,y=580)
e15=Entry(root,width=35,bd=5)
e15.place(x=0,y=600)
e15=Entry(root,width=40,bd=5).place(x=790,y=600)
```

#### #THIRD PART

```
l27=Label(root,text="ADDITIONAL INFORMATION",font=("Arial Bold",22),bg="grey",fg="black",).place(x=550,y=630)
l28=Label(root,text="LOCALITY WHERE VEHICLE IS PRINCIPALLY CHANGED",font=("Arial Bold",10),fg="black",).place(x=0,y=670)
l29=Label(root,text="IF NEW LOCATION ENTER THE DATE CHANGED",font=("Arial Bold",10),fg="black",).place(x=640,y=670)
l30=Label(root,text="Are any of the owners/lesses on active military duty or service?",font=("Arial Bold",10),fg="black",).place(x=1110,y=670)
c1 = Checkbutton(root,text="CITY",font=("Arial Bold",10),fg="black",).place(x=0,y=690)
c2 = Checkbutton(root,text="COUNTRY",font=("Arial Bold",10),fg="black",).place(x=55,y=690)
c3 = Checkbutton(root,text="TOWN OF",font=("Arial Bold",10),fg="black",).place(x=140,y=690)
e16=Entry(root,width=30,bd=5).place(x=230,y=690)
e17=Entry(root,width=50,bd=5).place(x=640,y=690)
c4 = Checkbutton(root,text="YES",font=("Arial Bold",10),fg="black",).place(x=1200,y=690)
c5 = Checkbutton(root,text="NO",font=("Arial Bold",10),fg="black",).place(x=1255,y=690)
```

L31=Label(root,text="IF YOU WOULD LIKE YOUR REGISTRATION RENEWALS SENT TO AN ADDRESS OTHER THAN RESDIDENCE/BUSINESS ADRESS ENTER IN TBELOW? ",font=("Arial Bold",10),fg="black",).place(x=0,y=710)

L32=Label(root,text="REGISTRATION MAILING ADDRESS-OPTIONAL",font=("Arial Bold",10),fg="black",).place(x=0,y=730)

L33=Label(root,text="CITY",font=("Arial Bold",10),fg="black",).place(x=600,y=730)

L34=Label(root,text="STATE",font=("Arial Bold",10),fg="black",).place(x=990,y=730)

L35=Label(root,text="PINCODE",font=("Arial Bold",10),fg="black",).place(x=1100,y=730)

e16=Entry(root,width=40,bd=5).place(x=0,y=750)

e17=Entry(root,width=40,bd=5).place(x=600,y=750)

e18=Entry(root,width=40,bd=5).place(x=990,y=750)

e19=Entry(root,width=40,bd=5).place(x=1100,y=750)

btn = Button(root,text="SUBMIT",font=("Arial Bold",15),fg="black",bg="red").place(x=550,y=790)

root.mainloop()

REGISTRATION INFORMATION

**Registration Period: (check one)** ☐ One Year ☐ Two Years(\$2 discount applies) ☐ Three Years(\$3 discount applies)  
(not available for vehicles subject to emissions testing)

**Registration Type:** ☐ Original ☐ Renewal ☐ Private ☐ Reissue(Plates and Decals)  
☐ Reissue(Decals Only) ☐ Rental Vehicle ☐ Transfer Plate Number:   
ENTER PLATE NUM See Reissue Plates below under plate information

☐ For Hire(complete "For Hire Information") ☐ Ridesharing(Cannot exceed 16 passengers including driver) **Seating Capacity:**

☐ Amateur Radio Operator call letters-Specify letters:  Other:  SPECIFY

**OWNER INFORMATION**

OWNERS FULL NAME(last,first,mid,suffix) OR BUSINESS NAME(if owned business)  TELEPHONE NUMBER  DMV CUSTOMER NUMBER/FEIN/SSN

CO-OWNERS FULL LEGAL NAME(last,first,mid,suffix)  TELEPHONE NUMBER  DMV CUSTOMER NUMBER/FEIN/SSN

Owners (and Lessees if applicable)Must provide their residence/home/business address where requested,this address can not be a P.O box.You Must complete form ISO-01 if you would like your address(es) updated

OWNER'S RESIDENCE/BUSINESS JURISDICTION(Apt #if applicable)  QTY  STATE  ZIP CODE

OWNER'S RESIDENCE/BUSINESS JURISDICTION(Apt #if applicable)  QTY  STATE  ZIP CODE

OWNER EMAIL ADDRESS  CO-OWNERS EMAIL ADDRESS

**ADDITIONAL INFORMATION**

LOCALITY WHERE VEHICLE IS PRINCIPALLY CHANGED  IF NEW LOCATION ENTER THE DATE CHANGED  Are any of the owners/lessees on active military duty or ☐ YES ☐ NO

☐ CITY ☐ COUNTRY ☐ TOWN OF  IF YOU WOULD LIKE YOUR REGISTRATION RENEWALS SENT TO AN ADDRESS OTHER THAN RESIDENCE/BUSINESS ADDRESS ENTER IN TBELOW?

REGISTRATION MAILING ADDRESS-OPTIONAL  CITY  STATE  PINCODE

**SUBMIT**

