

# KANSAS

Department of Revenue  
 Division of Vehicles  
 PO Box 2505, Topeka, KS 66601-2505  
<https://www.ksrevenue.gov/>

# TITLE AND REGISTRATION MANUAL APPLICATION

**County Name** \_\_\_\_\_ **Plate Type** \_\_\_\_\_ **Application Date** \_\_\_\_\_

**Owner's Name(s) (Last, First, Middle Initial)** \_\_\_\_\_ **DL, FEIN, TIN, SSN (provide one)** \_\_\_\_\_

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**VIN** \_\_\_\_\_ **Fuel type** \_\_\_\_\_ **Year** \_\_\_\_\_ **Make** \_\_\_\_\_ **Model** \_\_\_\_\_  
**Purchase/Brought into KS Date** \_\_\_\_\_ **Mileage** \_\_\_\_\_  Actual  Exceeds  Not Actual  Exempt  
**Empty Weight** \_\_\_\_\_ **Declared/Gross Weight** \_\_\_\_\_ **Truck Class** \_\_\_\_\_

**Title Mailing Address**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**License Plate/ Registration Mailing Address**

**Name** \_\_\_\_\_ **Push Notification Phone or Email** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**1<sup>st</sup> Lienholder Mailing Address**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**2<sup>nd</sup> Lienholder Mailing Address (Trk/Mbl Home only)**

**Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Transfer on Death**

**1<sup>st</sup> TOD Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**2<sup>nd</sup> TOD Name** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Plate Transfer Information**

**Previous Vehicle's VIN** \_\_\_\_\_ **Year** \_\_\_\_\_ **Make** \_\_\_\_\_ **Model** \_\_\_\_\_  
**Vehicle Sold to/Repossessed by** \_\_\_\_\_  
**Adding Name to Title/Registration**  
**Relationship**  Spouse  Parent  Child

\_\_\_\_\_  
*Signature of Person Being Added*

\_\_\_\_\_  
**Insurance Co. Name**

\_\_\_\_\_  
**Insurance Policy No.**

I hereby certify that I am a resident or have a bona fide place of business in this county and that I am an owner of and have in effect financial security for the aforementioned vehicle as required by Kansas Law. I further certify that all liens and/or encumbrances, if any, are listed and the information on this application is true and correct to the best of my knowledge.

**FALSE CERTIFICATION CAN RESULT IN CRIMINAL PROSECUTION**

**Owner's Signature(s)** \_\_\_\_\_

\_\_\_\_\_  
**Date**

**Fee Summary**

Title Fee	
Title Penalty	
Registration Fee	
Registration Penalty	
DMV Modernization Fee	
County Service Fee	
Law Enforcement Training Center Fee	
Reflectorized Plate Fee	
Property/Tax Due	
Property/Tax Penalty	
Previous Property/RV Tax Due	
Previous Property/RV Tax Penalty	
KHP Staffing and Training Fee	
Miscellaneous Fee	
Sales Tax	
<b>GRAND TOTAL</b>	