

555 Wright Way Carson City NV 89711 Reno/Sparks/Carson City (775)684-4DMV (4368) Las Vegas Area (702) 486-4DMV (4368) Rural Nevada or Out of State (877) 368-7828 www.dmvnv.com

APPLICATION FOR VEHICLE REGISTRATION

NRS Chapters 482 and 485

Nevada evidence of insurance must be presented to the Department of Motor Vehicles at the time of application for registration. Trailers are exempt from insurance requirements. All fields must be completed.

| PLEASE PRINT OR TYPE | | | | | | |
|---|---|--|---|--|--|---|
| Vehicle Identifica | ation Number | | | | | |
| | | | | | | |
| Year | Make | | Mo | del | ' | |
| • Truck or | bus: The declared g | ross weight (fo lbs. | r commercial v | ehicles, includ | le trailer | and load) is |
| | xcluding travel trailers tle will be based in | | | | | |
| name or should be motor vehicle liabili MUST BE INSURE coverage meets to Insurance card. On a tiered system may include a SR-2 In accordance with lapses for 91 days fees and fines and period of not less thapse of vehicle liab | registration for the above registered, I will continue ty insurance policy or by D BY AN INSURANCE Concerning the requirements set fout-of-State insurance will for an insurance lapse rabased on the length of the 2 and/or a Driver's Licens NRS Chapters 482 and or more, I understand and will be required to maintain three years from the rollity insurance on the aboves than 30 days; I will be | qualifying as a se company LICEN prth in NRS.485. In the accepted. Inge from \$250 to e lapse and the he Suspension. 485, if the motor of agree that I will ain a Certificate of registration reinstance we-referenced veh | y name, security a lf-insurer in comp SED IN THE STA 185" must be in Trailers are exemply \$750, and fines raistory of previous wehicle liability inside required to pay Financial Responsatement date. Addicle, I understand | as required by N liance with law. TE OF NEVAD ncluded on the ot from insurance anging from \$250 violation(s). Rein all applicable resibility (SR-22 H ditionally, if there and agree that n | RS 485.1 NOTE: A. The stee Nevada e requirem to \$1,000 enstatemen bove-refe egistration igh Risk In is a third ny driver's | 85, either by a THE VEHICLE tatement, "the Evidence of tents. Dare assessed trequirements renced vehicle reinstatement insurance) for a or subsequent license will be |
| fees and fines; and | I will be required to mair m the registration reinstat | tain a Certificate | | | | |
| | ss misdemeanor to use alse statement or knowing | | | | | |
| Full Legal Nam | | | | | | |
| | s License, Identifications sesses, or Motor Carried la | | er, Date of Birth | Last , | State | Zip Code |
| Mailing Address | | | 9 | | | |
| Telephone | Address | | E-mail _ | | State | Zip Code |
| SIGNATURE | | | | DATE | | |