

VERIFICATION OF VEHICLE IDENTIFICATION NUMBER

(42-3-105(1)(c) CRS) (42-6-107(1)(b) CRS)

This form has been combined to include the:

- DR 2087 Verification of Vehicle Identification Number
- DR 2418 Colorado Dealer Statement
- DR 2411 Application for Title and Registration (Reverse side)

Type
of
Vehicle →

- | | | |
|------------------------------------|---|-------------------------------------|
| <input type="checkbox"/> Passenger | <input type="checkbox"/> Trailer | <input type="checkbox"/> Motorcycle |
| <input type="checkbox"/> Truck | <input type="checkbox"/> Motor Home | <input type="checkbox"/> SUV |
| <input type="checkbox"/> Tractor | <input type="checkbox"/> Manufactured Home | |
| <input type="checkbox"/> Bus | <input type="checkbox"/> Special Mobile Machinery | |

INFORMATION

Vehicle Identification Number (VIN) <input type="text"/>					
Year	Make	Body	Model	Width	Length
Odometer	Color	CWT	GVW	Fuel - Check One	
License Plate Number		State	Expiration Date	<input type="checkbox"/> Gas	<input type="checkbox"/> Diesel
Temporary Tag Number		State	Expiration Date	<input type="checkbox"/> Electric	<input type="checkbox"/> Other

Additional Vehicle Identification Number (VIN) _____

Motor Number _____ Coach Number _____

Reason for Inspection:

Verified by:

- | | | |
|--|---|---|
| <input type="checkbox"/> Out of State | <input type="checkbox"/> Licensed Colorado Dealer | <input type="checkbox"/> County Clerk (at their discretion) |
| <input type="checkbox"/> Title correction | Dealer Number _____ | <input type="checkbox"/> Colorado Law Enforcement |
| <input type="checkbox"/> Other (Explain) _____ | <input type="checkbox"/> Licensed Colorado Emission Station | |
| | Emissions Number _____ | |

Name of Business or Agency			
Address	City	State	ZIP Code
I certify, under penalty of perjury in the second degree, that I have completed a physical inspection of the vehicle described above and the information is true and correct to the best of my knowledge.			
Printed First and Last Name of Inspector		Date	
Signature of Inspector		Title	

COLORADO DEALER STATEMENT CONCERNING AN OUT OF STATE VEHICLE (42-6-119(3) CRS)

Dealer	Dealer Number
I certify, under penalty of perjury in the second degree, that the vehicle as described above, at the time of sale: <ul style="list-style-type: none"> • This vehicle was free and clear of all liens and encumbrances: • This vehicle is not stolen: • The dealership has a sure and adequate title to the vehicle: and • The dealership has the right and authority to sell and transfer this vehicle. 	
Dealer Agent (printed name)	
Dealer Agent Signature	Date

APPLICATION FOR TITLE and/or REGISTRATION

(42-6-107 CRS) (42-3-105 CRS)

This form has been combined to include the:

- DR 2411 Application for Title and Registration
- DR 2087 Verification of Vehicle Identification Number (Reverse side)
- DR 2418 Colorado Dealer Statement (Reverse side)

PREVIOUS TITLE NUMBER	TITLE NUMBER

Vehicle Identification Number (VIN)

Year	Make	Body	Model	CWT	Color	Fuel (Check One) <input type="checkbox"/> Gas <input type="checkbox"/> Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Other
Dealer #	Date Purchased	Purchase Price	MSRP	Taxable Value	GVW	
Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	Odometer Reading & Indicator	Date Accepted	Fleet #	Unit #	Size or Cap.	GWWR

LEGAL NAME(S) AND ADDRESS OF OWNER(S) OR ENTITY	Lease Buy-Out <input type="checkbox"/> Yes <input type="checkbox"/> No	LEGAL NAME(S) AND PHYSICAL ADDRESS OF LESSEE
	JTWROS <input type="checkbox"/> Yes <input type="checkbox"/> No	INDICATE HERE IF REGISTRATION RENEWAL TO BE SENT TO DIFFERENT ADDRESS

FIRST LIENHOLDER NAME AND ADDRESS	Lienholder #	SECOND LIENHOLDER NAME AND ADDRESS	Lienholder #
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Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#	Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#
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THIRD LIENHOLDER NAME AND ADDRESS	Lienholder #	FOURTH LIENHOLDER NAME AND ADDRESS	Lienholder #
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Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#	Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#
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FIFTH LIENHOLDER NAME AND ADDRESS	Lienholder #	SIXTH LIENHOLDER NAME AND ADDRESS	Lienholder #
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Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#	Lien File No.	Lien Amount	Maturity Date	Date of Lien	CO.#
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Motor vehicle insurance or operator's coverage is compulsory in the State of Colorado. Non-compliance with this requirement is a misdemeanor traffic offense. The minimum penalty for such offense is a one-hundred-dollar fine. The maximum penalty for such offense is one year's imprisonment and a one-thousand-dollar fine. Upon obtaining a registration card, you will be required to sign an affirmation clause indicating compliance.

I certify under penalty of perjury in the second degree that the facts above are true and correct to the best of my knowledge, the legal address is shown and that the motor vehicle described above is subject to the lien(s) noted.

Owner or Agent Signature	Date
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