

Plateman Inc
DMV Checklist

State: _____

Lease: YES _____ NO _____

Lease Company Name and Address:

Retail: YES _____ NO _____ **Co-Owner?** _____

Owner Name and Address:

Co-Owner Name and Address (If Different):

Lien Holder: YES _____ NO _____ **Lien Code:** _____

Lien Holder Name and Address:

NEW PLATE: YES _____ NO _____

TRANSFER PLATE# _____

How Much Tax to be Paid? _____

COLOR OF VEHICLE _____

SOCIAL SECURITY# (NOT NEEDED FOR NY DEALS) _____

*******POWER OF ATTORNEY MUST BE SIGNED BY THE CUSTOMER(S)
AND NOTARIZED WITH APPOINTMENT AREA LEFT BLANK*******

Send Plates to Customer: YES _____ NO _____

*****Please send Return FedEX or UPS airbill if going to the customer*******

Please notarize the Certificate of Origin for all states