

STATEMENT OF FACTS

Complete the appropriate section(s) in full (including vehicle description) and sign Section H.			
LICENSE PLATE/CF NUMBER VEHICLE/VESSEL ID NUMBER YEAR/MAKE			
A. STATEMENT FOR USE TAX EXEMPTION			
This transfer is exempt from use tax because it is a:			
□ Family transfer sold between a parent, child, grandparent, grandchild, spouse, domestic partner, or siblings (if both are minors related by blood or adoption).			
Addition or deletion of family member (spouse, domestic partner, parent[s], son/daughter, grandparents, grandchildren).			
Gift (does not include vehicles traded between individuals, transfer of contracts or other valuable consideration).			
Court Order Inheritance			
NOTE: The Use Tax Exemption cannot be claimed if the vehicle/vessel being transferred was purchased from an otherwise qualifying relative who is engaged in the business of selling the same type of vehicle/vessel.			
The current market value is: \$			
B. STATEMENT FOR SMOG EXEMPTION			
The vehicle does not require a smog certification for transfer of ownership because: The last smog certification was obtained within the last 90 days. It is powered by: electricity diesel Other			
C. STATEMENT FOR TRANSFER ONLY OR TITLE ONLY			
This vehicle has not been used or parked on a street or highway or off-highway. I am applying for a:			
The vehicle is not currently registered. It has not been driven, moved, towed, or left standing on any California public highway to cause registration fees to become due. It was not transported over any California public highway or operated within California to cause off-highway fees to become due. Appropriate registration will be obtained before the vehicle is operated.			
D. WINDOW DECAL FOR WHEELCHAIR LIFT OR WHEELCHAIR CARRIER			
Enter your Disabled Person License Plate, or Disabled Veteran License Plate, or Permanent Disabled Person Parking Placard number below:			

DISABLED PERSON PLATE	DISABLED VETERAN PLATE	PERMANENT DISABLED F	PERMANENT DISABLED PERSON PLACARD			
The vehicle to which my Window Decal will be affixed is:						
LICENSE NUMBER	VEHICLE MAKE	VEHICLE ID NUMBER	VEHICLE ID NUMBER			
Mail to:		· · · · ·				
NAME						
ADDRESS						
CITY		STATE	ZIP			

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LICENSE PLATE/CF NUMBER VEHICLE/VESSEL ID NUMBI	R	YEAR/N	IAKE
E. STATEMENT FOR VEHICLE BODY CH	ANGE (OWNERSHIP CER	TIFICATE REQUIRED)	
The current market value of the vehicle or ve	ssel is: \$		
Changes were made at a cost of \$	on this date	·	
This is what I changed: Check all that apply: Unladen Weight changed because Motive Power changed from Body Type changed from Number of Axles changed from	(Public Weighm to		Exception: Trailers)
F. NAME STATEMENT (OWNERSHIP CER	TIFICATE REQUIRED)		
Please print			
□ I,a	nd	are one and	the same person.
☐ My name is misspelled. Please correct it to	:		
□ I am changing my name from	to		
G. STATEMENT OF FACTS			
H. APPLICANT'S SIGNATURE			
<i>I certify (or declare) under penalty of perjury correct.</i>	under the laws of the State	e of California that the for	egoing is true and
PRINTED LAST NAME FIRST NAME	MIDDLE NAME	DAYTIME PHONE NUM	IBER
SIGNATURE		DATE	
<u>X</u>			