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12 Digit ELT ID #

Name:

Full Legal Name or Business Name and Address:

Address:

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

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If Georgia Seller, County Name:

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

Lessee’s GA County Name:

Directly Financed Dealer Sale:

Yes

No

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

Lessee’s Phone Number:

**D**

**SECURITY INTEREST OR LIENHOLDER INFORMATION (Attach any information on additional lienholders)**

\_\_

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

12 Digit ELT ID #

Name:

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

Name:

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

Mailing Address:

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

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

Phone Number:

Email Address:

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

Address:

**F**

**ATTORNEY IN FACT INFORMATION – Attach original power of attorney if title is to be mailed to attorney-in-fact.**

\_\_

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Address:

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**OWNER INFORMATION**

**B**

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

Number of Owners:

**COMPLETE FOR ALL COMMERICAL VEHICLES**

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

Gross Vehicle Weight & Load:

Straight Truck?

Yes

No Used for Hire?

Yes

No

Leased Vehicle:

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

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

Type of Trailer Pulled?

Product Hauled?

Is this a Farm Vehicle?

Yes

No

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

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

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

Date of Birth:

Email Address:

Phone #

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

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

Business Name:

Name of Agent:

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

Address:

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

Mailing Address:

No

Yes *(If yes, complete Section D)*

If purchased from an out-of-state business, did you pick up the vehicle out-of-state?

Yes

No

\**Owner’s signature below warrants: I do solemnly swear or affirm under criminal penalty of a felony for fraudulent use of a false or fictitious*

*name or address or for making a material false statement punishable by fine up to $5,000 or by imprisonment of up to five years, or both that*

*the statements contained herein are true and accurate.*

**OWNER # 1**

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

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

\_\_\_\_\_

Full Legal Name:

Driver’s License #

State:

**A**

**VEHICLE INFORMATON**

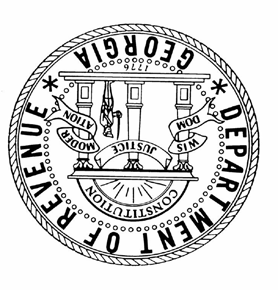
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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

Vehicle ID (VIN):

Current Title #



**Georgia Department of Revenue - Motor Vehicle Division**

**Form MV-1 Motor Vehicle Title Application**

**For instructions on how to complete this form, please see Instructions on page 2.**



Year:

Exceeds Mechanical Limits of Odometer

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

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

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

Body Style:

District #

Fuel Type:

Odometer exceptions:

EXEMPT

Not the Actual Mileage, Warning Odometer discrepancy

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

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

Odometer Reading:

Date Purchased:

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

\_

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

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

Make:

Current Title’s State of Issue:

Color:

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

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

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

Model:

GA County of Residence:

Cylinders:

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

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\_\_

Lessee’s Full Legal Name & Address or Business Lessee’s Full Name &

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

Date of Birth:

Email Address:

Phone #

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

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

Business Name:

Name of Agent:

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

Address:

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Mailing Address:

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

Date: \_

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

\**Signature of Owner 2 or Business Agent:*

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

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

Date: \_

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

\**Signature of Owner 1 or Business Agent:*

**OWNER # 2**

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

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\_\_\_\_\_

Full Legal Name:

Driver’s License #

State:

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

\_

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

**D**

**SELLER INFORMATION**

GA Dealer’s/Bank’s 12 Digit Customer ID # (If Applicable)

Driver’s License Number, if individual:

**MV-1 (Revised 10-2018)**

**C**

**LESSEE INFORMATION**

•

Lessee’s phone number

Whether the vehicle was directly financed by the dealer.

•

•

Lessee’s Georgia County name

•

Georgia county (if applicable), and

•

full name and address, and

Full legal name or business name and address,

•

Lessee’s Full legal name and address or Business Lessee’s

**LESSEE INFORMATION**

**D**

Provide:

applicable).

•

•

Lessee’s driver’s license lumber (if individual),

Georgia Dealer’s or Bank’s 12-digit Customer number (if

**D**

Provide:

If using a Power of Attorney, attach the Power of Attorney and fill in their:

**ATTORNEY IN FACT INFORMATION – Attached original power of attorney if title is to be mailed to attorney-in-fact.**

•

Email Address

**F**

•

Phone Number

•

Mailing Address

•

Name

•

12 Digit Customer ID #

List the following for the first two security interest or lienholders (attach any additional lienholder information to this form)

**SECURITY INTEREST OR LIENHOLDER INFORMATION (Attach any information on additional lienholders)**

**SELLER INFORMATION**

•

Address

•

Name

This section must be completed for all request concerning a commercial vehicle.

**COMPLETE FOR ALL COMMERICAL VEHICLES**

Also include Odometer reading and date purchase.

and Odometer information including: whether exempt, exceeds mechanical limits, not actual mileage.

Title’s State of Issue, Georgia County of Residence, District # (if known), Year of vehicle, Color, Cylinders of vehicle, Body style, Fuel Type,

Include all the requested information: Vehicle Identification Number (VIN), Make of vehicle, Model of vehicle, Current Title number, Current

This section must be completed in its entirety. If you do not know the district in which you live, please check with your County Tag Office.

**OWNER INFORMATION**

**B**

**http://dor.georgia.gov**

to locate the county tag office in your county of residence.

document(s) to the county tag office in the county where you reside or to the Department of Revenue (DOR), when applicable. Please refer to

**How to submit this Form:** This form must be completed in its entirety, legibly printed or typed, and submitted along with all required

**Purpose of this Form:** This form is to be used when applying for a tag and title and must be signed by all owners in Section B.

**INSTRUCTION PAGE**

**Form MV-1 Motor Vehicle Title Application**

**Georgia Department of Revenue - Motor Vehicle Division**

**VEHICLE INFORMATON**

**A**

•

Signature is required

applicable), email address, and telephone number.

•

If an individual, provide the driver’s license number, state of issuance, full legal name, date of birth, address, mailing address (if

telephone number.

•

If a business, provide the business name, the name of the signee, address, mailing address (if applicable), email address, and

**C**

For Owner number two:

*name or address or for making a material false statement punishable by fine up to $5,000 or by imprisonment of up to five years, or both*

For Owner number one:

**OWNER # 1**

*that the statements contained herein are true and accurate.*

\**Owner’s signature below warrants: I do solemnly swear or affirm under criminal penalty of a felony for fraudulent use of a false or fictitious*

All owners listed on the title must sign this form. By signing this form you are agreeing to the following:

List the number of owners, whether the vehicle is leased, and if it was purchased out-of-state.

**OWNER # 2**

•

Signature is required.

applicable), email address, and telephone number.

•

If an individual, provide the driver’s license number, state of issuance, full legal name, date of birth, address, mailing address (if

telephone number.

•

If a business, provide the business name, the name of the signee, address, mailing address (if applicable), email address, and