Car Registration Form California

Vehicle Owner Information	
Full Name:	
Residential Address:	
Contact Number:	
California Driver's License Number:	
Vehicle Information	
Vehicle Identification Number (VIN):	
License Plate Number:	
Make and Model:	
Year of Manufacture:	
• Color:	_
Emissions and Safety Information	
Passed Smog Check (Yes/No):	
Passed Safety Inspection (Yes/No):	
Registration Type	
New Registration:	
Transfer of Ownership:	
Renewal:	

Date of Purchase:	
wner Declaration	
hereby declare that the information provided is true and complete to the be	st of
y knowledge.	
• Signature:	
• Date:	