

Car Registration Form Sample

Personal Information

- Full Name: _____
- Date of Birth: _____
- Driver's License Number: _____
- Contact Number: _____

Vehicle Specifications

- Vehicle Make: _____
- Vehicle Model: _____
- Color: _____
- Year of Manufacture: _____
- VIN (Vehicle Identification Number):

Ownership Status

- Type of Ownership (Lease/Own):

- Purchase Date: _____
- Purchase Location: _____
- Previous Owner (If any): _____

Certification

- I certify the above information is accurate and true.
- Signature: _____
- Date: _____