

Two Wheeler Registration Transfer Form

Date: _____

Personal Details of the Current Owner

- Full Name: _____
- Address: _____
- Contact Number: _____
- Email: _____
- Two-Wheeler Registration Number: _____

Details of the New Owner

- Full Name: _____
- Address: _____
- Contact Number: _____
- Email: _____

Vehicle Details

- Make and Model: _____
- Engine Number: _____
- Chassis Number: _____

Acknowledgment

All Documents Submitted

Pending Documents: _____

Signature of Current Owner: _____

Signature of New Owner: _____

Date: _____