

# Vehicle Registration Transfer Form

Date: \_\_\_\_\_

## Current Owner Information

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Contact Details: \_\_\_\_\_
- Vehicle Registration Number: \_\_\_\_\_

## New Owner Information

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_
- Contact Details: \_\_\_\_\_

## Vehicle Information

Make & Model	Year of Manufacture	Chassis Number	Engine Number

## Transfer Details

- Reason for Transfer: \_\_\_\_\_
- Transfer Date: \_\_\_\_\_

**Authorization**

**Verified and Approved by Authority**

**Additional Comments:** \_\_\_\_\_