



## BENEFICIARY DESIGNATION TO CERTIFICATE OF TITLE APPLICATION

Please **COMPLETE** this application and submit it with the **REQUIRED PROOF OF IDENTITY** documents listed below.

**Vehicle Owner - valid Driver License or Identification Card**

**Vehicle Information - at least one of the following items: Registration Renewal Notice, Registration or Title**

**Beneficiary - copy of valid State Issued Driver License or ID Card and copy of birth certificate**

TYPE OF SERVICE REQUESTED				
<input type="checkbox"/> Add Beneficiary to Vehicle Title    or <input type="checkbox"/> Remove Beneficiary from Vehicle Title				
APPLICANT INFORMATION (Must be non-leased vehicle)				
OWNER FULL NAME (Last, First, Middle)		DATE OF BIRTH	STATE DRIVER LICENSE OR ID CARD #	
CO-OWNER FULL NAME (Last, First, Middle)				
BENEFICIARY FULL NAME (Last, First, Middle)		DATE OF BIRTH	STATE DRIVER LICENSE OR ID CARD #	
BENEFICIARY ADDRESS (Address must match Driver License or Identification Card)				
ADDRESS		CITY	STATE	ZIP CODE
VEHICLE INFORMATION				
YEAR	MAKE	MODEL	DC TITLE #	VEHICLE IDENTIFICATION NUMBER

I certify, under penalty of perjury, that the statements on this form are true and correct, and I will defend, indemnify, and hold the District of Columbia Department of Motor Vehicles harmless against any claim from anyone contesting the validity of the named beneficiary and issuance of the title to that beneficiary.

Signature of Owner(s):	Date:

OFFICIAL DMV USE			
Required Supporting Documents Provided (Yes) or (No)		Beneficiary Added (Yes) or (No)	Beneficiary Deleted (Yes) or (No)
TITLE #	DC DMV Examiner	Date	Operator's Number

If you have questions, please visit our website at [www.dmv.dc.gov](http://www.dmv.dc.gov) or call 311 in DC or 202-737-4404 outside the 202 area code. To report waste, fraud, or abuse by any DC Government Agency or official, call the DC Inspector General at 1-800-521-1639.