



## REDUCED REGISTRATION FEES DISABILITY APPLICATION

This application is to be used for vehicles over 3,500 pounds or greater if the vehicle weight is due to the accommodation of a disability.

TYPE OF SERVICE					
<input type="checkbox"/> New Title/ New Tags		<input type="checkbox"/> One-Year Registration w/ Residential Parking (RPP)			
<input type="checkbox"/> One-Year Registration		<input type="checkbox"/> Two-Year Registration		<input type="checkbox"/> Two-Year Registration w/ Residential Parking Permit (RPP)	
APPLICANT INFORMATION (If a leased vehicle – provide that name of the Lessor and attach the lease agreement)					
OWNER'S FULL NAME (Last, First, Middle)			DATE OF BIRTH	STATE DRIVER LICENSE OR ID CARD #	
BUSINESS NAME			FEDERAL EMPLOYEE IDENTIFICATION #		
JOINT OWNER'S FULL NAME (Last, First, Middle) <small>(If vehicle is leased, the lessee's name will not appear on the title)</small>			DATE OF BIRTH	STATE DRIVER LICENSE or ID CARD #	
CURRENT ADDRESS (Address must match DC Driver License or DC Identification Card)					
ADDRESS		UNIT/APT	CITY/STATE	ZIP CODE	
VEHICLE INFORMATION					
YEAR	MAKE	MODEL	UNLADEN WEIGHT	VEHICLE IDENTIFICATION NUMBER	DISABILITY ACCOMODATION
					YES / NO
ACTUAL MILEAGE		<input type="checkbox"/> I certify to the best of my knowledge that actual mileage is _____			
LIEN INFORMATION <small>(A Lien/Security agreement must accompany this application if applicable. If a lien exists, the title will be mailed to the Lien holder)</small>					LIEN DATE:
Name of Lien Holders		Lien Holders Address		Lien Amount	
INSURANCE COMPANY INFORMATION (Current Proof of DC Insurance must accompany this application)					
Name of Insurance Company		Policy Number	Policy Effective Date	Expiration Date	

I/we certify that the above information is true and correct to the best of my/our knowledge, information, and belief. Any person(s) using a fictitious name or address and/or knowingly making any false statements on this application is in violation of DC Law and subject to a fine of not more than \$1,000- or 180-days imprisonment or both.  
(DC Official Code § 22-2405)

Signature of Owner:	Date:
Signature of Joint-Owner:	Date:

*(Must be signed by Owner(s), Officer of Corporation, or Partner in Partnership)*

OFFICIAL DMV USE				
EXCISE TAX	SELLING PRICE (New Vehicles)	NADA BUSINESS/FAIR MARKET VALUE (Used Vehicles)		
\$	\$	\$		
TITLE # OR TAG# (HARD OR TEMPORARY)	Approval by DMV Examiner		Date	Operator's Number