

DUPLICATE CERTIFICATE OF REGISTRATION APPLICATION

Wisconsin Department of Transportation (WisDOT) **MV2026** 6/2015 s.341.11(3) Wis. Stats.

-							
Current License Plate Number Vehicle Identification Number (stand		Vehicle Identification Number (standard V	IN has 17 characte	ers)	Year	Make	
1 2 3 4 5	6 7 8	1 2 3 4 5 6 7 8 9 1	0 11 12 13 14	15 16 17			
Body Type							
Do you also need a year sticker?			Yes	No			
		,					
OWNER / LESSEE	Last Name	First Name	Middle Initial		Social Security	Number	
	Driver License Nur	mber		FEIN (if company	any owned)		
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	البليليا ا						
OWNER / LESSEE	Last Name	First Name	Middle Initial	1 2 3	Social Security	Number	
	Lastivanie	1 iiSt Name	Wildaic IIIIIai		oociai occurity	Number	
	Driver License Nur	mhor	FEIN (if company owned)				
	Driver License Nui	libei		FEIN (II company owned)			
Otro et A didee e	1 2 3 4	5 6 7 8 9 10 11 12	13 14	1 2 3	4 5 6 7	8 9	
Street Address City State ZIP Code							
Vehicle presently kept in				ity	Village	Town	
				Ly L	village	lowii	
COUNTY OF:	OF:						
COONTT OI.	01.						
Area Code - Telephone	Email Address						
			1				
_							
COMPLETE FORM and MAIL with \$2.00 FEE TO: Wisconsin Department of Transportation							
PO Box 7911							
Madison, WI 53707-7911							
	Madioon, W1 00707 7011						
Make check payable to: DECISTRATION FEE TRUST							
Make check payable to: REGISTRATION FEE TRUST							