



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

**GRATIS REGISTRATION APPLICATION
PUBLIC OWNED VEHICLE**

NO FEE

BMV USE ONLY		
MO.	DAY	YR.

LICENSE #

VEH. PURCHASE DATE	CERTIFICATE OF TITLE #
MO. YR.	
WILL THE VEHICLE DESCRIBED HEREIN BE USED EXCLUSIVELY FOR GOVERNMENTAL OR PROPRIETARY FUNCTIONS?	YES NO <input type="checkbox"/> <input type="checkbox"/>
INDICATE TYPE OF VEHICLE BY X	
<input type="checkbox"/> PASSENGER CAR/VAN	<input type="checkbox"/> TRUCK/CARGO VAN
<input type="checkbox"/> TRAILER	<input type="checkbox"/> MOTORCYCLE
<input type="checkbox"/> BUS	<input type="checkbox"/> OTHER

VEHICLE DATA

YEAR	MAKE	TYPE	COLOR
SERIAL NO.			

OWNER

GOVERNMENT CLASS			
<input type="checkbox"/> FEDERAL	<input type="checkbox"/> STATE	<input type="checkbox"/> COUNTY	<input type="checkbox"/> CITY <input type="checkbox"/> VILLAGE <input type="checkbox"/> TOWNSHIP
NAME		ADDITIONAL NAME	
CUSTOMER #			
ADDRESS		CITY	STATE ZIP CODE
MAILING ADDRESS (if different)			
BUSINESS PHONE ()			

MAIL TO:
OHIO BUREAU OF MOTOR VEHICLES
ATTN: GRATIS UNIT
P.O. Box 16521
Columbus, Ohio 43216-6521

IMPORTANT

1. APPLICATION MUST BE FULLY COMPLETED AND SIGNED.
2. ORIGINAL CERTIFICATE OF TITLE FOR THE NEW VEHICLE MUST ACCOMPANY APPLICATION

SIGNATURE OF CONTACT PERSON X	
TELEPHONE NUMBER	DATE

WARNING—APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION—OHIO REVISED CODE 2913.42.

APPLICATION MUST BE SIGNED BY OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.