

State of South Dakota Motor Vehicle Division 445 East Capitol Avenue Pierre, SD 57501

605-773-3541 dor.sd.gov

SD	Title 4	<b>#</b> :		

	Motor Vehicle/	Boat Title & Registrat	tion Application Coun	ty: Boat #:		
Α	This application is for a (select one):	This application is for a (select only one):				
Application	☐ Motor Vehicle	☐ Title Transfer	■ New Title	☐Operation by Law		
Request	☐ Boat	Repossession	Out-of-State Title Transfer	☐Unpaid Repair Bill		
		☐ Interstate Title	☐ Abando ned Title			
	Complete the applicable fields:					
B Vehicle/Boat Information	VIN/HIN:	Year:	Make: N	Model:		
	Secondary VIN:	Year	: Make:			
	Primary Color:	Secondary Color:	Previous State/B	rand:		
	Motor Vehicle: Body Type:	Weight/CC: _	Fuel Type:			
	Brand: (Check if applicable)	nufacturer Buy Back	☐Manufacturer Buy Back-Reb	uilt Parts Only		
	☐Manufacturer Buy Back-Salvage ☐Salvage Total Loss ☐Rec	overed Theft	Buy Back-Junking Certificate	_		
	Odometer (complete for vehicles 20 year	rs old or newer):	Units (select one):	⊓ <sup>Miles</sup> ⊓ <sup>Kilometers</sup>		
	Odometer Brand: (Check one):			<del></del> -		
	Boat: Length:fti	n. Hull Material:	Boat Type	·		
	Propulsion Typ	e of Use:				
C Owner & Address	Instructions: In the owner's/lessor's/trust's name section include first, middle, last. In the type of ownership section select from the following: and, or, DBA, Guardianship, lessee, lessor, trustee, etc. In the customer type section select from the following: individual, company, dealer, government, or trust. In the identification number section input the SD driver's license number, or identification number, social security number, or federal employer identification number.					
Information	1. Owner/Lessor/ Trust:		Type of Ownership	:		
	Customer Type:		Identification #:			
	Address:	City:	State:	Zip Code:		
	2. Owner/Lessor/ Trust:		Type of Ownership	:		
	Customer Type:		Identification #:			
	Address:	City:	State:	Zip Code:		
	3. Owner/Lessor/ Trust:		Type of Ownership	:		
	Customer Type:		Identification #:			
	Address:	City:	State:	Zip Code:		
	4. Owner/Lessor/ Trust:		Type of Ownership	<u> </u>		
	Customer Type:		Identification #:			
	Address:	City:	State:	Zip Code:		

D								
Title Mailing	Name:	e: Address:						
Address	City: Stat	te:	Zip Code:					
Information								
E								
Contact	Contact Name:							
Information	Email Address:		Phone #:					
	Note: A guide published by the automobile ind	ustry will be used to ch	neck values.					
F	Vehicle/Boat is:       □ Tax exempt (if claiming exemption, list #):       □ Rental Vehicle/SD Sales Tax #:							
Motor	venicie/Boat is: Tax exempt (if claiming exemp	tion, list #):						
Vehicle/Boat	■Non-profit donated vehicle/corporation #	·	☐ Title Only: (If applying for a "Title Only" in signing					
Purchase Information	Purchase Date:		this application you are attesting that the boat/vehicle will not be used upon the waterways,					
mormation			streets, or highways of this state or any state.)					
	1. Purchase Price Bill of Sale not available/NADA		Applications must be made with 45 days of the					
	2. Less Trade-in Allowance		purchase date.					
	3. Difference	0	PENALTY: Any person failing to					
	4. Tax (3% for boat, 4% for vehicles of line 3)		pay the full amount of excise tax is					
	5. Tax Penalty & Interest	1	subject to a Class 1 misdemeanor.					
	6. Credit for Tax Paid to Another State		PENALTY: Any person who					
	7. Title Fee	\$10.00	intentionally falsifies information					
	8. Late Fee (Application made after 45 days)     9. Lien Fee		on this application is guilty of a					
	10. Balance Due for Title Application		Class 6 felony.					
	South Dakota Dealer Price Certification: I here	by certify that the nur	chase price and trade-in allowance on this					
	application is correct and that all accessories a		•					
	Dealer Name:	gnature:						
	1 <sup>st</sup> Trade-in Information							
		VIN/HIN:	Title #:					
		VIIIV	Πας π					
	2 <sup>nd</sup> Trade-in Information							
	Year: Make:	VIN/HIN:	Title #:					
G	Electronic Lien & Title (ELT): A paper title is not	printed until lien(s) ar	e released or a request by a lienholder is approved					
Lienholder	1st Lienholder							
Information	Name:	A	Address:					
	City: State							
	2 <sup>nd</sup> Lienholder							
	Name:	Ac	Address:					
	City: State	·	Zip Code:					
Н	I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct.							
Unsworn	Signed on thisday of,at _		<del>.</del>					
Declaration	Printed Name:	Signature:	Signature:					
	Printed Name:							
	Printed Name:							
	Printed Name:	signature:						