



Cover Sheet - PA

Process Date 11/17/2025 Transaction Id 80274424
Titling State PA Military



1FDBF6P82NKA76011 2022 FORD
Used Truck/Cargo Van

Vehicle Info

Model: Transit
Body Type: Van
GVW: 10000
Fuel Type: Gas
Odometer Reading: 37816

Sale Information

Purchase Date: 11/07/2025
Sale Type: Purchase
Taxable Selling Price: 34,683.00
MSRP:
List Price:
Trade In Value:

Owner Info

Owner 1 Name: TOMMY WELSH
Owner 2 Name:
Registered Address: 5423 EAST BERLIN RD, EAST BERLIN,
York, PA, 17316
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name:
Address:
Lienholder 2 Name:
Address:

Registration Information

Application Type: Title & Registration
Registration Action: New Registration
Registration Period:
Plate Number:
Expiration Date:

Final Destination

Send to: TOMMY WELSH
Phone:
Mailing Address: 5423 EAST BERLIN RD, EAST BERLIN,
York, PA, 17316

Fee Summary

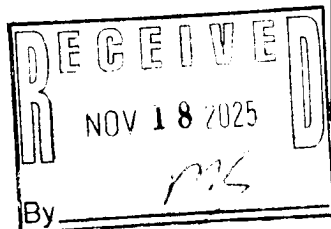
REGISTRATION FEE	\$278.00
PLATE FEE	\$20.00
TITLE FEE	\$72.00
LOCAL USE/ COUNTY FEE	\$5.00
PA STATE TAX (6%)	\$2,080.98
VITU FULL SERVICE FEE	\$165.00
PA STATE VARIABLE FEES	\$20.00
Total	\$2,640.98

Submitted By:

Michael Dorgan
Phone: (301)829-2800
Location: Century Ford of Mt Airy Inc
Address: 302 Century Dr, Mt Airy, Baltimore, MD, 21771

Pre-Checker Name

Comments / Resolution:



For your paperwork to be processed faster, please send your transaction documents in the order they are listed on the checklist. Thank you!

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FOLD AND DETACH HERE

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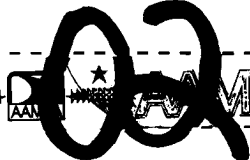


(PART B)

R319

PENNSYLVANIA DEPARTMENT OF TRANSPORTATION

Control# B 9477706

Place Your
Registration Plate
Number and
Dealer/Business
Partner ID# Sticker
Here

VBN0876 832300	E				E
	X P R E S				R E S
		MONTH	DAY	YEAR	

TEMPORARY REGISTRATION PERMIT

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MV-1 (7-19)							H. TAX/FEE'S			
A. VEHICLE DESCRIPTION	Make of Vehicle	Vehicle Identification Number (VIN). If tracing required, tape securely to reverse side of this copy.		Body Type (SDN, TK, Bus, etc.)	Model Year	Purchase Price (See Note On Reverse.)	37,683			
	Gross Vehicle Wt. Rating	Fuel Type: <input type="checkbox"/> Gasoline <input type="checkbox"/> Hybrid <input type="checkbox"/> Diesel <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Natural Gas	Other	PA DL/ID# or Bus ID#	Authorized Notary Public or Certified Inspection Mechanic (Print Name)		Less Trade-In			
	Check the appropriate block if the vehicle is to be used or was formerly used as a <input type="checkbox"/> Taxi or a <input type="checkbox"/> Police Vehicle (If applicable)			I certify that I have verified that a legible tracing cannot be secured and that the above VIN and vehicle weight information listed here and in Section F are correct.			Taxable Amount			
B. APPLICANT INFORMATION	Last Name (or Full Business Name)		First Name	Middle Name	PA DL/ID# or Bus ID#	Date of Birth	Sales Tax X 6% (.06), X 7% (.07) or X 8% (.08) * (See Note on Reverse.)			
	Co-Purchaser Last Name		First Name	Middle Name	PA DL/ID#	Date of Birth	Less Tax Credit			
	Street			Date Acquired/Purchased	COUNTY CODE		1. Sales Tax Due			
	City			State	Zip Code	Dealer/Bus. Partner ID# (If Applicable)	Refer to county codes listing on reverse side of yellow copy	1A. Exemption Reason Code (must be a number from 1 to 26 or 0)		
	NOTE: If a co-purchaser other than your spouse is listed and you want the title to be listed as "Joint Tenants With Right of Survivorship" (On death of one owner, title goes to surviving owner.) CHECK HERE <input type="checkbox"/> . Otherwise, the title will be issued as "Tenants in Common" (On death of one owner, interest of deceased owner goes to their heirs or estate.)							1B. Exemption No.		
C. MILEAGE INFORMATION	<input type="checkbox"/> Reflects the amount of mileage in excess of its mechanical limits.			<input type="checkbox"/> Is NOT the actual mileage.		ODOMETER READING	1C. PTA No.			
	WARNING: Federal and state laws require that you state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.					Tenths		2. Title Fee		
D. LIEN INFORMATION	If no lien. CHECK <input type="checkbox"/> Is this an ELT? (If yes, FIN required) <input type="checkbox"/> YES <input type="checkbox"/> NO			If no 2nd lien. CHECK <input type="checkbox"/> Is this an ELT? (If yes, FIN required) <input type="checkbox"/> YES <input type="checkbox"/> NO			3. Lien Fee			
	1st Lienholder Financial Institution Number			2nd Lienholder Financial Institution Number			4. Registration Or Processing Fee			
	1st Lienholder Name			2nd Lienholder Name			Fee Exempt Number as Assigned by the Department			
	Street			Street			5. County Fee ♦ (See Note on Reverse)			
E. VEHICLE TRADED	Make of Vehicle		Vehicle Identification Number (VIN)		Model Year		6. Duplicate Reg. Fee No. of Dup. Reg. Cards:			
	Body Type (SDN, BUS, TK, etc.)		Condition of Vehicle <input type="checkbox"/> GOOD <input type="checkbox"/> FAIR <input type="checkbox"/> POOR					7. Transfer Fee		
F. ADDITIONAL VEHICLE INFORMATION	Passenger, Taxi/Bus	<input type="checkbox"/> Passenger <input type="checkbox"/> Taxi <input type="checkbox"/> Limousine <input type="checkbox"/> School Bus <input type="checkbox"/> Mass Transit <input type="checkbox"/> Other Bus			Seating Capacity		8. Increase Fee			
	Motorcycle, Motor Driven Cycle, Moped	Cylinder Capacity 50cc or Less <input type="checkbox"/> YES <input type="checkbox"/> NO		Brake Horsepower <input type="checkbox"/> 1.5 or Less <input type="checkbox"/> 1.6 to 5.0 <input type="checkbox"/> Over 5.0				9. Replacement Fee		
		Operable Pedals <input type="checkbox"/> YES <input type="checkbox"/> NO		Max Design Speed 25 MPH or Less <input type="checkbox"/> YES <input type="checkbox"/> NO				10. TOTAL PAID (ADD 1 THRU 8) Send One Check In This Amount		
	Motor Home	Automatic Transmission <input type="checkbox"/> YES <input type="checkbox"/> NO		Designed/Altered for Road Use <input type="checkbox"/> YES <input type="checkbox"/> NO						
		Chassis Mfr:		Body Make:						
	Trailer & Vehicles Below	Number of Axles:		Req. Registered Gross Wt. (Including Load)						
Truck, Truck Tractor	Sum of GAWR's:		Unladen Wt. (Empty)							
	Req. Registered Gross Combination Wt.		Gross Combination Wt. Rating							
G. APPLICATION FOR REGISTRATION	Original Registration Plate - CHECK ONE			<input type="checkbox"/> Transfer of Previously Issued Registration Plate <input type="checkbox"/> Transfer & Replacement of Registration Plate						
	<input type="checkbox"/> Registration Plate to be issued by Department (Proof of insurance must be attached.)			<input type="checkbox"/> Transfer & Renewal of Registration Plate						
	<input type="checkbox"/> Exchange Registration Plate to be issued by Department			Registration Plate No.			Reason for Replacement <input type="checkbox"/> Lost <input type="checkbox"/> Defaced <input type="checkbox"/> Stolen <input type="checkbox"/> Never Received (Lost in Mail)			
	<input type="checkbox"/> Temporary Registration Plate issued by Full Agent (NOTE: This registration plate will expire 90 days from date of issuance.)			Expires Month Year		NOTE: If "Never Received" block is checked, applicant must complete Form MV-44.				
	Transferred From Title No.			VIN						
	Signature of Person From Whom Registration Plate is Being Transferred (If Other Than Applicant)			Sign Here			Relationship to Applicant			
	Temp. Registration Plate No.									
Insurance Company Name		NAIC No.		Policy No. (Or Attach Binder)		Policy Effective Date		Policy Expiration Date		
ISSUING AGENT INFORMATION	I certify that on month _____ day _____ year _____, I have checked to determine that the vehicle is insured and issued temporary registration to the above applicant, in compliance with all applicable provisions of the Vehicle Code and Department regulations.			Issuing Agent (Print Name)			Agent No.			
				Issuing Agent Signature			Telephone No.			
I. NOTARIZATION	Subscribed And Sworn To Before Me: Month Day Year			I/We certify that I/we have examined and signed this application after its completion. I/We further certify that all statements herein are TRUE and CORRECT and make application for certificate of title for the vehicle described in Section A. If any exemption is claimed, the purchaser further certifies that they are authorized to claim this exemption. I/We acknowledge that I/we may lose my/our operating privilege(s) or vehicle registration for failure to maintain financial responsibility on the currently registered vehicle for the period of registration. I/We acknowledge that I/we may be subject to a fine not exceeding \$5,000 and imprisonment of not more than two years for any false statement that I/we make on this application.						
	SIGNATURE OF PERSON ADMINISTERING OATH									
	COMMONWEALTH OF PENNSYLVANIA - NOTARY SEAL Jeanette I Braun Notary Public Montgomery County My Commission Expires 7/21/2027 Commission # 1263800			Signature of Purchaser or Authorized Signer			Telephone No.			
				Signature of Co-Purchaser/Title of Authorized Signer			MESSENGER NO.			

Record #: 249015

For:
TOMMY EDWARD WELSH
5423 EAST BERLIN RD
EAST BERLIN, PA 17316
NON C

Date: 11/21/2025
Time: 12:46 PM

Clerks Initials: ERB

Offline Transaction		Agency Fees	
Title Number		Commonwealth of PA - Temp/Trans	2435.98
VIN	1FDBF6P82NKA76011		
Year	2022		
Make	FORD		
Odometer	37816		
Tag Number	VBN0876		
Comments:			
SENT TO PENNDOT			
TITLE NOT NOTORAIZED			
		Agency amount paid	2435.98
		Payment Type	CHECK(353984)
		Check to state 0	0.00
		Surcharge	0.00
		Total Agency Fees	2435.98
		Service Fees	
		Messenger Fee	0.00
		Notary Fee	0.00
		Copy/Fax Fee	0.00
		Plate Fee	20.00
		Admin/Clerical Fee	30.00
		Payment Type	OTHER
		Total Service Fee	50.00
		Surcharge	0.00
Sworn and subscribed to before me on 21-Nov-2025.		Total Surcharge	0.00
		Total Amount Due	2485.98
		Amount Tendered	2485.98
		Change Due	0.00
		No Refunds on Service or Notary fees. We are not responsible for the work the State fails to process.	
Notary Seal			

Your Direct Connection with PENNDOT, "Online", State & Service Fees Apply