# WISCONSIN TITLE & LICENSE PLATE APPLICATION

**MV1-1 10/2026**

Processor ID No. J004

Received – Date – Opened 9/17/2026

[redacted]

Title No. – New License Plate No
26288J0040368 WY1604

Amount Received – Document No
Check Cash CC

**Complete form using BLUE or BLACK INK.**

**Check any that apply** *(see instructions)*: For Hire; Title Only; Title Only IRP; Salvage; Taxi; Police; Replica; Flood Damaged; Street Modified; Hail Damaged; Reconstructed; MFR Buyback; Homemade

## Section A – New Vehicle Owner Information

Owner Legal Name (Last, First, Middle Initial OR Business Name) ☐ Opt Out regarding open records laws *(see instructions)*: H E N N I C K C O R Y M

Birth Date: 0 6 – 2 8 – 1 9 7 8

Owner Social Security Number – **Required**: – – **OR**

Wisconsin Driver License Number – **Required**: H 5 2 0 – 1 1 3 7 – 8 2 2 8 – 0 7 **OR**

FEIN Number (if company owned) – **Required**: –

Co-Owner Name (if any) (Last, First, Middle Initial) (check one) ☐ OR ☐ AND

Birth Date: – –

Co-Owner Social Security # or Driver License # or FEIN Number – **Required**

**Street Address** (include P.O. Box if applicable): N2977 SHADOW CIRCLE DR

**City**: REDGRANITE

**State**: WI

**ZIP Code**: 54970

Owner Day time (Area Code) Telephone Number

If this is a leased vehicle, list Lessee Name

Lessee Social Security # or Driver License # or FEIN Number – **Required**

Lessee Street Address

City

State

ZIP Code

Lessee Day time (Area Code) Telephone Number

## Section B Vehicle Information

Vehicle Identification Number: 3 G T U U D E 8 7 T G 4 6 7 2 1 7

WI License Plate to Transfer or Temporary Plate

Plate Type: LTK

| Year | Make | Type (Car, Truck, Van, etc.) | Color | Fleet No. *(Optional)* | Date You First Drove This Vehicle in Wisconsin |
|---|---|---|---|---|---|
| 2026 | GMC | TRUK | Gray | | 9/17/2026 |

☐ Check box if plates transferred between spouses/domestic partners (Ch. 770). License plates *cannot* be transferred between other family members.

Vehicle is kept in County: OF Waushara

City ☐ Village ☐ Town ☑ (check one): OF LEON

## Section C Non Operation

The vehicle described on this application has not been operated upon public highways between dates indicated. From: Through:

## Section D – Loan Information – Use this section if you are adding a new lien. Use form ***MV2051*** to list second lender, attach to MV1

Name of Lending Agency(s) or Person(s): GM FINANCIAL

Secured Party Number(s): 0 0 1 1 8 8 1 6

(Area Code) Telephone Number: 8002842271

Street Address (include P.O. Box if applicable): P O. Box 1510

City: COCKEYSVILLE

State: MD

ZIP Code: 2 1 0 3 0

## Section E – Fees

| | | |
|---|---|---|
| **Title Fee** – $214.50 | $ | 214.50 |
| **Purchase Price** (WARNING: It is a crime to understate the purchase price) | $ | 63629.50 |
| **Less trade-in allowance** | $ | 0.00 |
| **Amount subject to tax** | $ | 63629.50 |
| **State Sales Tax** (amount subject to tax x 0.05) | $ | 3181.48 |
| **Local Sales Tax** (see instructions) | $ | 318.15 |
| **Loan Filing Fee** – $10 (pay fee for each loan in Section D) | $ | 10.00 |
| **License Plate Fee – Required** (check one) | $ | 116.60 |
| ☐ Passenger Vehicle $85 | | |
| ☐ Light Truck (private operation only): 4,500 or 6,000 pounds gross weight or less $100 | | |
| ☐ 8,000 pounds gross weight or less $116.60 | | |
| ☐ Other License Plate Types (see information at right) | | |
| **License Plate Issuance Fee** - $12 ($6 per plate) | $ | 12.00 |
| **Miscellaneous Fees** (see instructions to determine if any apply) | | |
| Annual Electric or Hybrid Vehicle Surcharge | $ | 0.00 |
| Wheel Tax | $ | 0.00 |
| Motor Carrier Class Fee from Section F | $ | |
| Temporary Plate Fee – $3 (only if no plate to transfer, and if applying at an authorized agent) | $ | 0.00 |
| Counter Service Fee – $5 (if you apply in person at WisDOT) | $ | |
| Processing Fee | $ | 38.00 |
| **ENTER FEE TOTAL** | $ | 3890.73 |

Pay title fee if you are changing the owner(s) on the title, or titling the vehicle in Wisconsin for the first time. To obtain a replacement title please use form MV2119, *Replacement Title Application*.

See instructions to determine which taxes apply.

If tax exempt, enter code

If tax exempt selected is: 1 Qualifying Family Member

Enter qualifying family member relationship

If other, list reason

For other plate types see Section F on back of this page

Enter plate type

and gross weight if applicable

and registration period

**Note:** For Heavy Vehicles that qualify for Consecutive Monthly or Quarterly registration, see back page of instructions for more information.

**MAIL** the **original vehicle title** (not a copy), application and check to

**WI Dept. of Transportation**
**P.O. Box 7949**
**Madison WI 53707-7949**

**Make Check Payable To: Registration Fee Trust**

**PAGE 2 MUST ALSO BE COMPLETED**