WISCONSIN TITLE & LICENSE PLATE APPLICATION

MV1-1 10/2026

Processor ID No. J004 | Received – Date – Opened 10/10/2026

[redacted]

Title No – New License Plate No
26289J0040125 WY1607

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)*	Birth Date
E W E R T C H A S E D	0 4 – 2 3 – 2 0 0 8

Owner Social Security Number – **Required**	Wisconsin Driver License Number – **Required**	FEIN Number (if company owned) – **Required**
– –	OR E 6 3 0 – 1 0 4 0 – 8 1 4 3 – 0 8	OR –

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)	**City**	**State**	**ZIP Code**	Owner Day time (Area Code) Telephone Number
19 ROYAL CREST DR	RICE LAKE	WI	54868	

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	WI License Plate to Transfer or Temporary Plate	Plate Type
1 C 6 S R F H T X K N 9 0 8 4 0 5		LTK

Year	Make	Type (Car, Truck, Van, etc.)	Color	Fleet No. *(Optional)*	Date You First Drove This Vehicle in Wisconsin
2019	RAM	TRUK	Black		10/10/2026

☐ 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 Barron — City ☑ Village ☐ Town ☐ (check one) OF RICE LAKE

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)	Secured Party Number(s)	(Area Code) Telephone Number
ROYAL CREDIT UNION	0 0 0 0 4 8 3 4	7158338111

Street Address (include P.O. Box if applicable)	City	State	ZIP Code
P O. Box 970	EAU CLAIRE	WI	5 4 7 0 2

Section E – Fees

Title Fee – $214.50		$ 214.50
Purchase Price (WARNING: It is a crime to understate the purchase price)	$ 29350.00	
Less trade-in allowance	$ 0.00	
Amount subject to tax	$ 29350.00	
State Sales Tax (amount subject to tax x 0.05)		$ 1467.50
Local Sales Tax (see instructions)		$ 146.75
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		$ 20.00
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		$ 2025.35

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