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: 26289J0040079 A839BP

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)*: G E B H A R D T K Y L E W

Birth Date: 0 3 – 2 6 – 1 9 8 5

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

OR

Wisconsin Driver License Number – **Required**: G 1 6 3 – 5 1 9 8 – 5 1 0 6 – 0 1

OR

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

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

Co-Owner Birth Date: – –

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

Street Address (include P.O. Box if applicable): 1085 DAILEY PL

City: RIVER FALLS

State: WI

ZIP Code: 54022

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: W B 1 0 M 2 3 0 7 T 6 M 0 5 4 1 3

WI License Plate to Transfer or Temporary Plate: A 8 3 9 B P

Plate Type: CYC

Year	Make	Type (Car, Truck, Van, etc.)	Color	Fleet No. *(Optional)*	Date You First Drove This Vehicle in Wisconsin
2026	BMW	CYCL	Blue		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 Pierce

City ☑ Village ☐ Town ☐ (check one): OF RIVER FALLS

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): BMW BANK OF NORTH AMERICA

Secured Party Number(s): 0 0 0 4 0 7 1 4

(Area Code) Telephone Number: 6147807268

Street Address (include P.O. Box if applicable): P O. Box 1910

City: COCKEYSVILLE

State: MD

ZIP Code: 2 1 0 3 0

Section E – Fees

Title Fee – $214.50		$ 214.50
Purchase Price		$ 27905.00
(WARNING: It is a crime to understate the purchase price)		
Less trade-in allowance		$ 8150.00
Amount subject to tax		$ 19755.00
State Sales Tax	(amount subject to tax x 0.05)	$ 987.75
Local Sales Tax	(see instructions)	$ 98.78
Loan Filing Fee – $10	(pay fee for each loan in Section D)	$ 10.00
License Plate Fee – Required (check one)		$ 0.00
☐ 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)	$ 0.00
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		$ 1349.03

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