WISCONSIN TITLE & LICENSE PLATE APPLICATION

MV1-1 10/2026

Processor ID No: J004

Received – Date – Opened: 8/28/2026

[redacted]

Title No – New License Plate No: 26292J0040107 BEE1233

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)*: V C F S A U T O L E A S I N G C O M P A N Y L L C

Birth Date: – –

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

Wisconsin Driver License Number – **Required**: – – – **OR**

FEIN Number (if company owned) – **Required**: 4 5 – 6 9 5 1 1 0 7

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): PO BOX 91300

City: MOBILE

State: AL

ZIP Code: 36691

Owner Day time (Area Code) Telephone Number:

If this is a leased vehicle, list Lessee Name: REBECCA KATE RYAN

Lessee Social Security # or Driver License # or FEIN Number – **Required**: R 5 0 0 7 3 1 9 7 7 1 4 0 9

Lessee Street Address: 5330 N SHORELAND AVE

City: MILWAUKEE

State: WI

ZIP Code: 53217

Lessee Day time (Area Code) Telephone Number:

Section B Vehicle Information

Vehicle Identification Number *(standard VIN has 17 characters)*: 7 J D D A 3 V K 2 T G 0 6 0 6 7 9

WI License Plate to Transfer or Temporary Plate:

Plate Type: AUT

Year: 2026

Make: VOLV

Type (Car, Truck, Van, etc.): TRUK

Color: White

Fleet No. *(Optional)*:

Date You First Drove This Vehicle in Wisconsin: 8/28/2026

☐ 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: Milwaukee

City ☐ Village ☑ Town ☐ (check one) OF: WHITEFISH BAY

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): VCFS LIEN COMPANY LLC

Secured Party Number(s): 0 0 1 2 0 8 3 9

(Area Code) Telephone Number: 3147024058

Street Address (include P.O. Box if applicable): P.O. Box 91300

City: MOBILE

State: AL

ZIP Code: 3 6 6 9 1

Section E – Fees

Title Fee – $214.50	$	214.50
Purchase Price (WARNING: It is a crime to understate the purchase price)	$	84800.00
Less trade-in allowance	$	0.00
Amount subject to tax	$	84800.00
State Sales Tax (amount subject to tax x 0.05)	$	0.00
Local Sales Tax (see instructions)	$	0.00
Loan Filing Fee – $10 (pay fee for each loan in Section D)	$	10.00
License Plate Fee – Required (check one)	$	85.00
☐ 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)	$	12.00
Miscellaneous Fees (see instructions to determine if any apply)		
Annual Electric or Hybrid Vehicle Surcharge	$	175.00
Wheel Tax	$	30.00
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	$	564.50

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: 3 Lessor

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