



CLERK TO THE BOARD



RECORDING



MOTOR VEHICLE



ELECTIONS

MESA COUNTY CLERK & RECORDER

Sheila Reiner

Title and Registration Mailing Instructions for New Residents of Colorado

Attached are all the documents required to complete and process the title and/or plates for your vehicle(s) coming into Colorado.

Please complete the documents as needed and return with a payment to:

Overnight:

Mesa County Clerk
200 S Spruce St
Grand Junction, CO 81501
Attn: New Registrations

Regular Mail:

Mesa County Clerk
Dept. 5008
P.O Box 20,000
Grand Junction, CO 81502-5001
Attn: New Registrations

Fax: 970-244-1676

E-mail: plates@mesacounty.us

Phone: 970-244-1664

A fee of \$5.00 will be added for postage to mail the plates via regular mail.

If you own your vehicle and have the title OR You are financing your vehicle but you are holding the title to the vehicle you will need to send in the following:

1. The out of state title.
2. DR 2698-Verification of Vehicle Identification Number. You can call your local law enforcement to get this completed. They will come to your house to do the inspection.
3. DR 2842 Supplemental Secure and Verifiable Identification. Make certain to have someone witness your ID and signature.
4. DR 2504 Colorado Residency Establishment
5. Proof of insurance. This must be a **current Colorado** policy.
6. DR 2444 Statement of Fact will need to be included **only** if you want us to mail the plates and registration to a different address than the one we have on file.

If your vehicle is being financed and you do not have the title you will need to send in the following:

1. The current or no more than 6 month expired registration.
2. DR 2698-Verification of Vehicle Identification Number. You can call your local law enforcement to get this completed. They will come to your house to do the inspection.
3. DR 2842 Supplemental Secure and Verifiable Identification. Make certain to have someone witness your ID and signature.
4. DR 2504 Colorado Residency Establishment
5. The name and address of your lienholder
6. Proof of insurance. This must be a **current Colorado** policy.
7. DR 2444 Statement of Fact will need to be included **only** if you want us to mail the plates and registration to a different address than the one we have on file.

Payment Options

Paying by check

If you wish to pay by a check please email or fax our office with all the documents required for title and registration.

Email- Make the subject line "New title and plates"

Fax- Make a cover sheet with "New title and plates"

The clerk will verify that your documents are correct and will give you a quote for the title, taxes, and registration fees. Submit the original documents to our office via mail along with a check for the amount quoted to you. The clerk will process your request and your plates and registration will be mailed to you within 5-10 business days. Your title will come a few weeks after your plates.

Be aware an additional \$5.00 will be added to your end total for postage fees.

Paying by E-check

If you wish to pay by E-check please email or fax our office with all the documents required for title and registration.

Email- Make the subject line "New title and plates"

Fax- Make a cover sheet with "New title and plates"

The clerk will verify that your documents are correct and will give you a quote for the title, taxes and registration fees. Submit the original documents to our office via mail along with the E-Check Authorization sheet in this packet and the clerk will process your request. Your plates and registration will be mailed to you within 5-10 business days. Your title will come a few weeks after your plates.

Be aware there is an additional \$1.00 charge to pay with an E-check along with an additional \$5.00 for postage for the plates.

Paying by credit/debit card

If you wish to pay by credit/debit card please email or fax our office with all the documents required for title and registration.

Email- Make the subject line "New title and plates"

Fax- Make a cover sheet with "New title and plates"

The clerk will verify that your documents are correct and will give you a quote for the title, taxes and registration fees. Submit the original documents to our office via mail along with the Credit Card Authorization sheet in this packet and the clerk will process your request. Your plates and registration will be mailed to you within 5-10 business days. Your title will come a few weeks after your plates.

Be aware there is an additional credit card processing fee as well as an additional \$5.00 added for postage of the plates.

Please note all quotes are valid for the month they are quoted. For example if you request for a quote in May, that quote provided is only good for May of that same year.

Please allow up to 5-10 business days for processing.

Mesa County will not be liable for any plates that may get lost in the mail. If your plates do not make it to your address you will need to come into the office with the vehicle information and we will replace your plates for you at an additional cost.

 CLERK TO THE BOARD

 RECORDING

 MOTOR VEHICLE

ELECTIONS

MESA COUNTY CLERK & RECORDER

 *Sheila Reiner*

CREDIT CARD PAYMENT AUTHORIZATION

970-244-1664

Credit Card (please mark one)

- Visa
- MasterCard
- American Express
- Discover

Card Number:

Expire Date: ____/____

Card Holder

Name: _____

Billing Address:

Phone Number: (____) _____

I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. *The charge will show on my statement as CO Motor Vehicle Services.*

Signature: _____

Date: _____



CLERK TO THE BOARD



RECORDING



MOTOR VEHICLE



ELECTIONS

MESA COUNTY CLERK & RECORDER



E-Check Authorization Form

Account Type (please mark one)

- Personal Checking Account
- Personal Savings Account
- Business Checking Account
- Business Savings Account

NAME
ADDRESS
CITY, STATE, ZIP

0123

01-23456789

DATE: _____

PAY TO THE
ORDER OF

\$

DOLLARS

BANK NAME
ADDRESS
CITY, STATE, ZIP

FOR

⑆0⑆2345678⑆

⑆0⑆234567890⑆23⑆

0⑆23

Bank Routing
Number

Bank Account
Number

Check
Number

Routing Number _____

Account Number _____

Check Number: NOT NEEDED

Account Holder Name _____

Billing Address:

Phone Number (____) _____

I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. The charge will show on my statement as *CO Motor Vehicle Services*.

Signature: _____

Date: _____

 CLERK TO THE BOARD

 RECORDING

 MOTOR VEHICLE

ELECTIONS

MESA COUNTY CLERK & RECORDER

Sheila Reiner

CREDIT CARD PAYMENT AUTHORIZATION

970-244-1664

Credit Card (please mark one)

- Visa
- MasterCard
- American Express
- Discover

Card Number:

Expire Date: ____/____

Card Holder

Name: _____

Billing Address:

Phone Number: (____) _____

I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. *The charge will show on my statement as CO Motor Vehicle Services.*

Signature: _____

Date: _____



CLERK TO THE BOARD



RECORDING



MOTOR VEHICLE



ELECTIONS

MESA COUNTY CLERK & RECORDER

Sheila Reimer

E-Check Authorization Form

Account Type (please mark one)

- Personal Checking Account
- Personal Savings Account
- Business Checking Account
- Business Savings Account

NAME
ADDRESS
CITY STATE ZIP

0123
01 23456789

DATE _____

PAY TO THE
ORDER OF

\$ _____

BANK NAME
ADDRESS
CITY STATE ZIP

0123456789

0123456789 012345678901234 0123

Bank Routing
Number

Bank Account
Number

Check
Number

Routing Number _____

Account Number _____

Check Number: **NOT NEEDED**

Account Holder Name _____

Billing Address:

Phone Number (____) _____

I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. The charge will show on my statement as *CO Motor Vehicle Services*.

Signature: _____

Date: _____

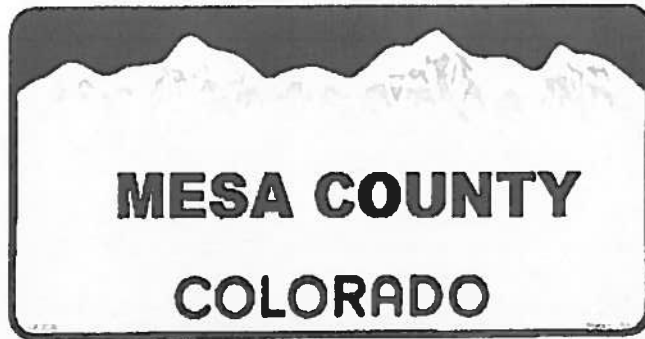


PLATE MAILING NEW RESIDENT COVER SHEET
AND CHECKLIST

**THIS SHEET MUST BE ON TOP OF THE SUBMITTED
DOCUMENTS TO ENSURE EXPEDIENT PROCESSING!**

WITH THIS COVER SHEET I HAVE INCLUDED:

- o DR2395 Application for Title and/or Registration
 - o Out of State Title if applicable
- OR**
- o Current Out of State Registration with Lienholder Information
 - o DR2698 Verification of Vehicle Identification Number
 - o DR2842 Supplemental Secure & Verifiable Identification Form
 - o **Colorado Proof of Insurance**
 - o DR2504 Colorado Residency Establishment
 - o DR2444 (if required per instructions)
 - o Joint Tenancy with Rights of Survivorship if surrendering title
 - o Electronic Payment Authorization Form(if using e-check or card)
 - o Quote with completed check

Name: _____

Daytime Phone #: _____

Email: _____

Application For Title and/or Registration

C.R.S. 42-3-105, 42-3-304(25)(c), 42-6-107, 42-6-116, 42-6-117
 Any Alteration or Erasure may Void this Document

Vehicle Identification Number (VIN) <input style="width: 100%;" type="text"/>										Fuel Type* *If electric, is it plug-in electric? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Year	Make	Body	Model	Color	CWT	Off-Highway Vehicle <input type="checkbox"/> Yes <input type="checkbox"/> No		Snowmobile <input type="checkbox"/> Yes <input type="checkbox"/> No			
Dealer #	Date Purchased		Commercial Use <input type="checkbox"/> Yes <input type="checkbox"/> No	MSRP		Size (W x L)		Bus Cap. <input type="checkbox"/> Adult <input type="checkbox"/> Juvenile			
Legal Name(s) as It Appears on Identification* and Address of Owner(s) or Entity				Lease Buy-Out <input type="checkbox"/> Yes <input type="checkbox"/> No		Legal Name(s) as it Appears on Identification and Physical Address of Lessee					
* <input type="checkbox"/> DR 2421 Attached										Indicate Alternate Address Here if The Registration Renewal Should be Sent to a Different Address	
First Lienholder Name and Address or ELT E- Number					Second Lienholder Name and Address**						
Lien Amount					Lien Amount						
Indicate Alternate Address Here if The Title Should be Sent to a Different Lienholder Address					Indicate Alternate Address Here if The Title Should be Sent to a Different Lienholder Address						
<p>*DR 2421 Statement of One in the Same is required when the owner's name on the Secure and Verifiable ID differs from the owner's name on the application/title. **If more than two lienholders, please attach separate documentation.</p> <p>Motor vehicle insurance or operator's coverage is compulsory in the State of Colorado. Proof of insurance is required prior to issuance of a registration. Non-compliance with this requirement is a misdemeanor traffic offense. Pursuant to 42-4-1409, C.R.S. the penalties for failure to have motor vehicle insurance coverage is a Class 1 Misdemeanor Traffic Offense punishable by a mandatory minimum ten days imprisonment, or three hundred dollar fine, or both or a mandatory maximum one year imprisonment, or one thousand dollar fine, or both shall be imposed by section 42-4-1701(3)(a)(II)(A), C.R.S.; and</p> <p>a. A minimum mandatory fine of not less than five hundred dollars or greater if imposed by the court; and</p> <p>b. At the discretion of the court, not less than forty hours of community service, subject to the provisions of section 18-1.3-507, C.R.S.</p> <p>c. A second or subsequent conviction within a period of five years following a prior conviction, a minimum mandatory fine of not less than one thousand dollars.</p> <p>After obtaining a registration, you will be required to sign an affirmation clause indicating compliance with insurance requirements.</p> <p>Unless a person waives his or her confidentiality, the information contained in the person's motor vehicle record shall not be used for any purpose other than a purpose authorized by law, pursuant to C.R.S. 42-2-121 (4)(a).</p> <p>I certify, under penalty of perjury in the second degree, that the above information is true and accurate to the best of my knowledge.</p>											
Owner or Agent Signature										Date	
Printed name of Owner/Agent as it appears on Identification:											
Secure and Verifiable ID of Owner/Agent: <input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other:											
ID#				Expires				DOB			
The undersigned witness affirms that the named owner of the vehicle identified in this document presented the identification described above.											
Witness Signature										Date	
County Use Only (Dealers/Lienholders: Do Not Write Below this Line)											
Previous Title Number						Title Number					
Date Accepted		Purchase Price		Odometer Reading & Indicator		GVWR		Fleet #		Unit #	
First Lienholder #				Second Lienholder #							
Lien File No.		Lien Amount		Maturity Date		Date of Lien		Lien File No.		Lien Amount	
Taxes Paid:						Filing Fees:					
Additional Comments:											
										Clerks Initials _____	

COLORADO RESIDENCY ESTABLISHMENT

C.R.S. 42-1-102 (81)

Residency is established when one of the following occur (whichever shall occur first)

- Any person who owns or operates any business in this state.
- Any person who has resided within this state continuously for a period of ninety days.
- Any person who has obtained gainful employment within this state.

Owner Name		
Owner Address		
Year	Make	VIN
PROVIDE DATE OF RESIDENCY PER ABOVE STATUTE:		
Date		
PROVIDE THE DATE THE VEHICLE WAS BROUGHT INTO COLORADO:		
Date		
<i>I certify, under penalty of perjury in the second degree, that the above statements are true and accurate to the best of my knowledge.</i>		
Signature		Date

SUPPLEMENTAL SECURE AND VERIFIABLE IDENTIFICATION INFORMATION AND ATTESTATION CLAUSE

ANY ALTERATION OR ERASURE VOIDS THIS DOCUMENT

This form may be used as an attachment to existing forms inventory which does not contain the secure and verifiable identification information or attestation. Please attach this completed form to the document(s) being presented for Title and/or Registration.

SECURE AND VERIFIABLE IDENTIFICATION OF		
Name as it Appears on Identification		
Agency (If Applicable)		
Identification Information (for acceptable forms of ID please see form DR 2841) <input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other _____		
ID #	Expires	DOB
This section to be used with DR 2219 Persons with Disabilities Parking Privileges Application. Identification shown above belongs to: <input type="checkbox"/> Individual (Placard holder) <input type="checkbox"/> Guardian <input type="checkbox"/> Parent <input type="checkbox"/> Business		
* Affidavit of one in the same is required if the name on ID differs in any way from name on title assignment.		
_____ and _____ ARE ONE IN THE SAME <input type="checkbox"/> PERSON <input type="checkbox"/> COMPANY		
I, certify under penalty of perjury in the second degree, that the above statements are true and accurate to the best of my knowledge.		
Signature		
The undersigned witness affirms that the identification described above was presented to me.		
Witness Printed Name		
Witness Signature	Date	

Secure and Verifiable ID

Secure and Verifiable ID is required to obtain:

- New Titles
- Duplicate Titles (vehicles purchased on or after 07/01/2006)
- New Registrations
- New Temporary Registration Permits
- New Placards

The following types of identification are Secure and Verifiable:

- Any Colorado Driver License, Colorado Driver Permit or Colorado Identification Card, current or expired one year or less. (Valid temporary paper license with In-valid Colorado Driver's License, Colorado Driver's Permit, or Colorado Identification Card, expired one year or less is acceptable.)
- Out-of-state issued photo driver's license or photo identification card, photo driver's permit current or expired one year or less.
- U.S. Passport current or expired less than 10 years.
- Valid foreign passport with I-94 or valid processed for I551 stamps. Valid I-94 issued by Canadian government with L1 or R1 status and a valid Canadian drivers license or valid Canadian identification card.
- Valid I551 Resident Alien/Permanent Resident card. No border crosser or USA B1/B2 Visa/BCC cards.
- Valid I688 Temporary Resident, I688B, and I766 Employment Authorization Card with intact photo.
- Valid US Military ID (active duty, dependent, retired, reserve and National Guard).
- Tribal Identification Card with intact photo. (U.S. or Canadian)
- Certificate of Naturalization with intact photo.
- Certificate of (US) Citizenship with intact photo.

If you have questions about Secure and Verifiable Identification, please contact the Title and Registration Sections at 303-205-5608.

State Of Colorado

Joint Tenancy with Rights of Survivorship Acknowledgement of Intent

C.R.S. 38-11-101

Any Alteration or Erasure may Void this Document

To create joint tenancy with rights of survivorship, there must be specific language declaring such intent, signed under penalty of perjury in the second degree by all owners. This form is only applicable to multiple owners.

Joint Tenancy with rights of Survivorship is defined as: A form of legal co-ownership of property (also known as survivorship). At the death of one co-owner, the surviving co-owner becomes sole owner of the property. Transfer of ownership requires copy of death certificate and signature of survivor.

Tenancy in Common is defined as: The equal or unequal holding of property by two or more persons. At the death of one co-owner, the deceased share of the property goes to his/her estate and is to be divided according to his/her will or the law in the absence of a will. Transfer of ownership requires documents appointing a personal representative for the decedent.

Vehicle Identification Number	Year	Make	Model
If any owner chooses Tenancy in Common or if neither box is checked; the Colorado Certificate of Title will be issued as Tenancy in Common.			
Owner One	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.		
	Owners Signature		Date
Owner Two	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.		
	Owners Signature		Date
Owner Three	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.		
	Owners Signature		Date
Owner Four	I _____ (print name) request the Colorado Certificate of Title for the Vehicle described above be issued in: <input type="checkbox"/> Joint Tenancy With Rights of Survivorship <input type="checkbox"/> Tenancy in Common Per C.R.S. 42-6-116; I certify under penalty of perjury in the second degree that the above information is true and correct to the best of my knowledge.		
	Owners Signature		Date

