



CLERK TO THE BOARD



RECORDING



MOTOR VEHICLE



ELECTIONS

MESA COUNTY CLERK & RECORDER

*Sheila Reiner*

## Title and Registration Mailing Instructions for a Private Party sale with a Colorado Title

Attached are all the documents required to complete and process the title and plates for your new purchase. We can transfer license plates from another vehicle as long as there is at least one owner in common on both vehicles. A copy of the current registration will need to be submitted in order to do this.

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](mailto:plates@mesacounty.us)

**Phone:** 970-244-1664

A fee of \$3.00 will be added for postage to mail the plate's via regular mail.

**You will need to send in:**

1. Colorado title. Before this is sent to us make sure the following are checked and completed:

- The seller(s) is the same person that is on the front of the title. Make sure the seller(s) hand prints and signs their name on the back of the title under the "seller" section as it appears on the front of the title correctly.
- The odometer is filled in and the odometer indicator is checked. This only applies to vehicles 9 years old or **newer**. Any vehicle that is 10 years old or **older** transferring the odometer is not necessary.
- The dates of sale and purchase price are filled in.
- The buyer(s) has filled in their hand printed name(s) on the back of the title under "buyer" section and signed their name.
- The buyer will also need to print their **physical address** on the back of the title under the address section as well. If you have a separate mailing address you will need to complete the DR 2444- Statement of Fact form in this packet.

2. Bill of Sale (optional)

3. DR 2842 Supplemental Secure and Verifiable Identification. Make certain to have someone witness your ID and signature.

4. Proof of insurance. This must be a **current Colorado** policy.

5. 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.

6. If you want to transfer plates we will need a copy of the current registration for the plates you want to move to your new vehicle.

## **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 \$3.00 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 \$3.00 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 \$3.00 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.**



## 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.

|                                                                                                                                                                                                                                                                                                      |         |      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|------|
| <b>SECURE AND VERIFIABLE IDENTIFICATION OF</b>                                                                                                                                                                                                                                                       |         |      |
| Name as it Appears on Identification                                                                                                                                                                                                                                                                 |         |      |
| Agency (If Applicable)                                                                                                                                                                                                                                                                               |         |      |
| Identification Information (for acceptable forms of ID please see form DR 2841)<br><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.<br>Identification shown above belongs to:<br><input type="checkbox"/> Individual (Placard holder) <input type="checkbox"/> Guardian <input type="checkbox"/> Parent <input type="checkbox"/> Business |         |      |
| <b>* Affidavit of one in the same is required if the name on ID differs in any way from name on title assignment.</b>                                                                                                                                                                                |         |      |
| * _____                                                                                                                                                                                                                                                                                              |         |      |
| 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 invalid 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.



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## 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: \_\_\_\_\_



**MESA COUNTY CLERK & RECORDER**  
*Sheila Reiner*

**E-Check Authorization Form**

**Account Type (please mark one)**

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

**NAME** \_\_\_\_\_ **0123**  
**ADDRESS** \_\_\_\_\_  
**CITY, STATE ZIP** \_\_\_\_\_ **01-2345/6789**  
**DATE** \_\_\_\_\_

**PAY TO THE ORDER OF** \_\_\_\_\_ \$

\_\_\_\_\_ **DOLLARS**  
**BANK NAME**  
**ADDRESS**  
**CITY, STATE ZIP**

**FOR:** \_\_\_\_\_  
 \*0 1 2 3 4 5 6 7 8 9 \* 0 1 2 3 4 5 6 7 8 9 0 1 2 3 \* 0 1 2 3  
 |-----| |-----| |-----|  
**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: \_\_\_\_\_