Data items collected by the eGov Vehicle Title request but not collected by the DS-102 Form;

- 1. Registration Type
 - a. Mission Vehicle
 - b. Personal Vehicle

| *Mission: | | |
|--|---|-----------------|
| Select a Mission | | ~ |
| *Registration Type: | | |
| Mission Vehicle | O Personal Vehicle | |
| Next Cancel | | |
| | | |
| HOME » DMV » VEHICLE TITLE | ite United States of America Version 2.0.2662 | 8.0 |
| | | *Vehicle Model: |
| HOME » DMV » VEHICLE TITLE Application for Title: Vehi | cle Information | *Vehicle Model: |
| HOME » DMV » VEHICLE TITLE Application for Title: Vehi | cle Information *Vehicle Make: | *Vehicle Model: |
| HOME » DMV » VEHICLE TITLE Application for Title: Vehi *Vehicle Identification Number: Vehicle Body: | Cle Information *Vehicle Make: Select a Make | *Vehicle Model: |
| HOME » DMV » VEHICLE TITLE Application for Title: Vehi *Vehicle Identification Number: Vehicle Body: | Cle Information *Vehicle Make: Select a Make Vehicle Year: | *Vehicle Model: |
| HOME » DMV » VEHICLE TITLE Application for Title: Vehi *Vehicle Identification Number: Vehicle Body:Select a Body Type | Cle Information *Vehicle Make: Select a Make Vehicle Year: | *Vehicle Model: |

2. Vehicle Title Type:

- a. JUNK
- b. LEASE
- c. SALVAGE
- d. STOLEN VEHICLE

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Application for Title: Vehicle Title Type

| *Vehicle Title Type: | |
|----------------------|---|
| | |
| | |
| | |
| ○ SALVAGE | |
| O SELF-TERMINATIN | G |
| O SELL (OUTSIDE THE | E FOREIGN MISSION COMMUNITY) |
| | |
| O TRANFER WITHIN T | THE FOREIGN MISSION COMMUNITY (DIPLOMAT TO DIPLOMAT |
| O TRANFER WITHIN T | THE FOREIGN MISSION COMMUNITY (DIPLOMAT TO MISSION) |
| O TRANFER WITHIN T | THE FOREIGN MISSION COMMUNITY (MISSION TO DIPLOMAT) |
| O TRANFER WITHIN 1 | THE FOREIGN MISSION COMMUNITY (MISSION TO MISSION) |
| Back Next Ca | ncel |
| | |

Application for Title: Buyer Information

| *Surname: | *Given Name: | |
|-----------------|----------------|--|
| | | |
| *Street Number: | *Street Name: | Street Type: Quadrant: Unit Type: Unit Number: |
| *City: | *State: | *Zip Code: |
| | Select a State | ✓ |
| Back Next Ca | ancel | |
| | | |

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3. Transferee Information:

- a. PID
- b. Date of Birth

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Application for Title: Transferee Information

E-Gov cannot be used to transfer title to another country's Mission or diplomat/employee of another country's Mission. Applications of this nature must be submitted manually, not via e-Gov. Title transfers within e-Gov must be to a Mission of your country or a diplomat/employee of your country.

| *PID: | *Surname: | *Given Name: | *Date of Birth: |
|------------------|-----------|--------------|-----------------|
| | | | |
| *Mission: | | | |
| Select a Mission | | | |
| Back Next Cano | cel | | |

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ROB MILLER

- 4. Junkyard Information:
 - a. Junkyard Name
 - b. Street Number
 - c. Street Name
 - d. Street Type
 - e. Quadrant
 - f. Unit Type
 - g. Unit Number
 - h. City
 - i. State
 - j. Zip Code

Application for Title: Junkyard Information

| *Junkyard Name: | | | | |
|-----------------|------------------------------------|--------------|----------------------|--------------|
| *Street Number: | *Street Name: | Street Type: | Quadrant: Unit Type: | Unit Number: |
| *City: | * State : Select a State | ~ | *Zip Code: | |
| Back Next C | ancel | | | |

5. Lease Information:

- a. Name
- b. Street Number
- c. Street Name
- d. Street Type
- e. Quadrant
- f. Unit Type
- g. Unit Number
- h. City
- i. State
- j. Zip Code

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Application for Title: Lease Information

| *Name: | | | | |
|-----------------|----------------|--------------|----------------------|--------------|
| *Street Number: | *Street Name: | Street Type: | Quadrant: Unit Type: | Unit Number: |
| | | ~ | | ▼ |
| *City: | *State: | | *Zip Code: | |
| | Select a State | \checkmark | | |
| Back Next Ca | ancel | | | |

- 6. Insurance Company Information:
 - a. Insurance Company Name
 - b. Street Number
 - c. Street Name
 - d. Street Type
 - e. Quadrant
 - f. Unit Type
 - g. Unit Number
 - h. City
 - i. State
 - j. Zip Code

Application for Title: Insurance Company Information

| *Insurance Compan | y Name: | | | |
|-------------------|----------------|--------------|----------------------|--------------|
| *Street Number: | *Street Name: | Street Type: | Quadrant: Unit Type: | Unit Number: |
| | | ~ | | ✓ |
| *City: | *State: | | *Zip Code: | |
| | Select a State | ~ | | |
| Back Next C | ancel | | | |

- 7. Stolen Information:
 - a. OFM Report Number
 - b. Stolen Type

Application for Title: Stolen Information

| *OFM Report Number: | | | | | |
|---------------------|--------|--------|--|--|--|
| | | | | | |
| *Stolen | Type: | | | | |
| 🔾 Juni | k O Sa | alvage | | | |
| Back | | | | | |

8. Owner Information:

- a. PID
- b. Date of Birth

HOME » DMV » VEHICLE TITLE

Application for Title: Owner Information

| *PID: | *Surname: | *Given Name: | *Date of Birth: | |
|-----------------|----------------|--------------|----------------------|--------------|
| | | | | |
| *Street Number: | *Street Name: | Street Type: | Quadrant: Unit Type: | Unit Number: |
| | | × | ✓ | ✓ |
| *City: | *State: | | *Zip Code: | |
| | Select a State | ~ | | |
| Co-Owner: | | | | |
| None 🗸 | | | | |
| Back Next Ca | ncel | | | |

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9. New Mission Information: New Mission

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Application for Title: New Mission Information



10. Remarks

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|--------|-----|-----------------|--|

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

| AP | PLICATION FOR TITLE | Registration Type | Title Purpose | | | |
|-------------------------------|------------------------|-------------------------|--|--------------|-----------------|---|
| APPLICATION FOR TITLE MISSION | | MISSION | SELL (OUTSIDE THE FOREIGN MISSION COMMUNITY) | | IITY) | |
| Mission DC - WASHING | GTON - EMBASSY OF CANA | DA | | | | |
| Vehicle Identi | fication Number | | Make | Model | Odometer (mi) | |
| 1 | | | ACURA | м | 1 | |
| Body | | | Model Year | Weight (lbs) | Vehicle Color | |
| 3 DOOR EXTE | NDED CAB / CHASSIS | | | | ALUMINUM/SILVER | |
| Buyer | | Buyer Residence Address | | | | |
| Surname | Given Name | 1 STREET | | | | |
| NAME | NAME | CITY, AL 12345 | | | | |
| There are no r | emarks | | | | | |
| Add Remark | | | | | | |
| | | | | | | ^ |
| | | | | | | × |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 United States Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

The official (diplomatic, consul, staff) federal license plates issued for this vehicle will not be removed from the vehicle until authorized by the United States Department of State, Office of Foreign Missions and the official federal license plates will be returned to the Office of Foreign Missions.



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Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

Sale or transfer titles to an individual or mission should not have a lien. If the vehicle has a lien, then a sale or transfer title to an individual or mission will not be processed. The lien must be satisfied before this title will be processed.

| APPLICATION FOR TITLE | Registration Type MISSION | Title Purpose TRANFER WITHIN THE FOREIGN MISSI | Title Purpose FRANFER WITHIN THE FOREIGN MISSION COMMUNITY (DIPLOMAT TO DIPLOMAT) | | | | |
|---|------------------------------|--|--|----------------------------------|---|--|--|
| Mission DC – WASHINGTON – EMBASSY OF | CANADA | | | | | | |
| Vehicle Identification Number 1 | | Make ACURA | Model M | Odometer (mi) 1 | | | |
| Body 3 DOOR EXTENDED CAB / CHASSI | 5 | Model Year | Weight (Ibs) | Vehicle Color ALUMINUM/SILVER | | | |
| Transferee | | | | | | | |
| ID Number | Surname | Given Name | | Date of Birth | | | |
| 12345678 | NAME | NAME | | 10/4/2017 | | | |
| Mission GA - ATLANTA - CONSULATE GEN | IERAL OF CANADA (ATLAN | A, GA) | | | | | |
| There are no remarks | | | | | | | |
| Add Remark | | | | | 0 | | |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 United States Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

HOME » DMV » VEHICLE TITLE

ROB MI

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

| APPLICATION FOR TITLE | Registration Type MISSION | | Title Purpose STOLEN – SALVAGE | OFM Report No. 1 | |
|--|---|------------|-----------------------------------|---------------------|--|
| Mission DC - WASHINGTON - EMBASSY OF CANADA | | | | | |
| Vehicle Identification Number | | Make | Model | Odometer (mi) | |
| 1 | | ACURA | м | 1 | |
| Body | | Model Year | Weight (lbs) | Vehicle Color | |
| 3 DOOR EXTENDED CAB / CHASSIS | | | | ALUMINUM/SILVER | |
| Insurance Company Name NAME | Insurance Company Address 1 STREET CITY, AL 12345 | | | | |
| There are no remarks | | | | | |
| Add Remark | | | | 0 | |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 United States Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

The official (diplomatic, consul, staff) federal license plates issued for this vehicle will not be removed from the vehicle until authorized by the United States Department of State, Office of Foreign Missions and the official federal license plates will be returned to the Office of Foreign Missions.

Please take a moment to confirm your entry. If it is correct, click the Submit button to send the application.

Export titles should not have a lien. If the vehicle has a lien, then a letter on the financial institution's letterhead giving permiss export vehicle from United States must be provided as a supporting document.

| APPLICATION FOR TITLE | | | | Registration Type PERSONAL | Title Purpose EXPORT |
|---------------------------------|------------------------|---------------------------|----------------------------|---|-------------------------|
| Mission DC – WASHINGTO | N - EMBASSY OF CANAL | A | | | |
| Owner PID 12345678 | Surname NAME | Given Name NAME | Date of Birth 10/4/1955 | Residence Address 1 STREET CITY, AL 12345 | |
| Vehicle Identificati | on Number | | Make | Model | Odometer (mi) |
| 1 | | | ACURA | м | 1 |
| Body | | | Model Year | Weight (lbs) | Vehicle Color |
| 3 DOOR EXTENDE | D CAB / CHASSIS | | | | ALUMINUM/SILVER |
| There are no rema | rks | | | | |
| Add Remark | | | | | |
| | | | | | 0 |

Applicant, by submitting this application, certifies that, in accordance with the provisions of Title 18 United States Code, Section 1001, prohibiting the making of a false statement in connection with any federal matter, the information stated here is true and correct.

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