

***** In person appointments are not available for new IRP or IFTA account set ups *****

Instructions: Review, complete, and return all pages of this packet to the Motor Carrier Section by email at motorcarrier@nd.gov or by fax at (701) 328-3500. Please call 701-328-1287 with any questions.

Applicants Name:	
Email:	Phone:
Mailing Address:	
Physical Address:	
Desired Effective Date:	

Step 1: Establish that North Dakota is the appropriate base jurisdiction for IRP (International Registration Plan).

Scenario 1: Account in a Personal Name

If the account is being opened in an individual's personal name, all proofs of residency must include the applicant's name and the same North Dakota physical street address (PO Boxes are **not** acceptable). Please provide a copy of the applicant's North Dakota driver's license or non-driver identification, along with **two additional items** from the list below reflecting the declared address:

- Federal income tax returns filed from North Dakota with a physical street address.
- Personal income taxes are paid to North Dakota with a physical street address.
- Real estate or personal property taxes paid to North Dakota with a physical street address.
- Utility bills (electricity, gas, water, internet service, landline phone) in North Dakota in the applicant's name with physical street address.
- Vehicle titled or registered in North Dakota in the applicant's name with a physical street address.

Scenario 2: Account in a Business Name Out of Your Residence

If the account is being opened in a business name using a home address, all proofs of residency must include the applicant's name and the same North Dakota physical street address (PO Boxes are **not** acceptable). Provide a copy of the applicant's ND driver's license or non-driver identification, along with **two additional items** from the list below:

- If the applicant is a corporation and the principal owner is a resident of North Dakota
- Federal income tax returns filed from North Dakota with a physical street address.
- Personal income taxes are paid to North Dakota with a physical street address.
- Real estate or personal property taxes paid to North Dakota with a physical street address.
- Utility bills (electricity, gas, water, internet service, landline phone) in North Dakota in the applicant's name with physical street address.
- Vehicle titled or registered in North Dakota in the applicant's name with a physical street address.

Scenario 3: Account in a Business Name as an “Established Place of Business”

If opening an account under a business name as an “Established Place of Business,” the physical structure must be located in North Dakota at a physical street address (PO Boxes are **not** acceptable) and must be owned or leased by the applicant or registrant. **The following documentation is required to verify the business:**

- A 12-month lease agreement or real estate tax statement (if owned) showing a physical street address in North Dakota.
- Photos clearly displaying company signage and posted hours of operation.
- Proof that the location is staffed a minimum of 20 hours per week by a W-2 employee of the applicant or registrant on a permanent basis (not an independent contractor) for the general management of the trucking-related business. Evidence of trucking-related business activities, which may include logistics planning, fleet management, driver management, load handling, regulatory compliance, customer service, or technology integration.

Please Note:

- We may request additional documentation as needed to verify that the applicant maintains an established place of business within the state.
- Fleet records must be maintained at this physical location unless otherwise permitted under Section 1035.
- Virtual or shared office spaces do not qualify.

Step 2: Are you operating under your own USDOT number or someone else’s?

The USDOT number must be listed as **Active**, and the Carrier Operation status must be marked as **Interstate** with FMCSA.

- My own USDOT number: _____
- Someone else’s USDOT number: _____

If operating under someone else’s USDOT number, a copy of the lease agreement must be submitted and include the following details:

- USDOT number
- Lessor and Lessee names
- Dates of the lease
- Vehicle Vin(s)
- Responsible party for IFTA reporting
- Signatures and dates from both parties

Step 3: Complete the attached SFN 2477, International Registration Plan Original Application - Schedule A.

☐ Is the vehicle already titled in North Dakota in your personal or business name and not changing ownership?

- Provide a copy of the stamped IRS Form 2290 if the registered weight is 55,000 lbs. or higher.

☐ Is the vehicle an out-of-state title and not changing ownership?

- Provide a clear copy of the front and back of the most current title and stamped IRS Form 2290 if the registered weight is 55,000 lbs. or higher.

This is referred to as a “**REG-ONLY**” transaction, meaning the vehicle will be titled in another state but registered in North Dakota.

NOTE: The **REG-ONLY** option **is** not available for vehicles titled in Delaware, Oregon, Georgia, Montana, Alaska, New Hampshire, **or** any Canadian Province.

- If your title is from one of these jurisdictions, you must transfer the title to North Dakota and pay excise tax based on the fair market value of your vehicle.

☐ Recently purchased vehicle (title not yet in your name)

Submit the following:

- The original title (mailed or dropped off at the Bismarck Motor Carrier Office)
- Application for Certificate of Title & Registration of a Vehicle (not required for North Dakota titles)
- Damage/Salvage Disclosure Statement (if the vehicle is less than 9 years old)
- IRS stamped Form 2290 (if registered weight is 55,000 lbs. or higher, unless purchased within the last 60 days)
- Bill of Sale
- Scale weight ticket to include VIN of vehicle

Step 5: Complete the attached application SFN 17105 for an IFTA (International Fuel Tax Association) license if you open your own IFTA account.

Step 6: Complete the UCR (Unified Carrier Registration) here: <https://www.ucr.gov>

Note: If your vehicle is leased to a company, skip **Step 6**

Step 7: Please review both the IRP and IFTA manual in full. By initialing below, you are confirming that you have read and understood the contents of each manual.

Initial: _____ IRP Manual: <https://www.dot.nd.gov/manuals/mv/irp-manual.pdf>

Initial: _____ IFTA manual: <https://www.dot.nd.gov/manuals/mv/ifta-manual.pdf>

Step 8: Please review the IRP record keeping requirements outlined in Article X of the IRP Plan. By initialing below, you are confirming that you have read and understood these requirements.

Initial: _____ IRP Recordkeeping reviewed
https://cdn.ymaws.com/www.irponline.org/resource/resmgr/jurisdiction_info_2/the_plan_1_1_19.pdf

Step 9: Please review the IFTA record keeping requirements outlined in Section P500 of the IFTA Procedures Manual. By initialing below, you are confirming that you have read and understand these requirements.

Initial: _____ IFTA Recordkeeping reviewed
<https://www.iftach.org/manuals/2019/PM/Procedures%20Manual%2011-22-19.pdf>

Step 10: Complete the attached Agreement to Maintain Records SFN 60450

Must be completed by the carrier and not service bureau

Applicants Printed Name	Applicants Signature	Date

INTERNATIONAL REGISTRATION PLAN ORIGINAL APPLICATION (SCHEDULE A)

North Dakota Department of Transportation, Motor Vehicle
SFN 2477 (7-2024)



MOTOR VEHICLE DIVISION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE SUITE 103
BISMARCK ND 58505-0791
Telephone (701) 328-1287
Fax (701) 328-3500
Website: <https://dot.nd.gov>

(For Office Use Only)

US DOT Number	FEIN/TIN	License Year	IRP Account Number	Fleet Number

Carrier/Company Name		
DBA Name		
Physical Street Address		
City	State	Zip Code
Mailing Address		
City	State	Zip Code

☐ March 31

☐ June 30

☐ September 30

Please select one: This will determine when your registration expires

☐ Household Goods Carrier

☐ Private Carrier

☐ Haul for Hire

Please select one: This is your type of operation

Contact Carrier Information

Applicant's Name	Telephone Number	Fax Number	E-Mail
Service Bureau Name	Telephone Number	Fax Number	E-Mail

I declare, with my signature, that I am knowledgeable of the the Federal or State Motor Carrier and Hazardous Materials Safety Regulations.

The undersigned, under oath, swears under penalty of perjury that the information furnished in this application and the attached schedules are true and correct and certifies that these vehicles will be insured as required by law (NDCC 39-08-20).
The undersigned agree to maintain records in accordance with the IRP and IFTA requirements.

Signature of Applicant	Date / /
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All Columns Must be Completed by Carrier

1	2	3	4	5	6	7*	8	9	10	11
ND TITLE NUMBER	LICENSE PLATE NUMBER	UNIT NUMBER	Y E A R	MAKE	VEHICLE IDENTIFICATION NUMBER	T Y P E	A X L E S	B S U E S A T S	** F U E L	EMPTY WEIGHT

*TYPE (Column Number 7)

TT - TRUCK TRACTOR
TR - TRACTOR (Semi)
TK - TRUCK (Straight)
BU - BUS
TW - WRECKER

**FUEL (Column Number 10)

D - DIESEL
G - GASOLINE
P - PROPANE

*** (Column Number 18)

Is the carrier responsible
for safety expected to
change during the year?

12	13	14	15	Carrier Responsible for Safety		
NAME OF OWNER (as listed on title)	DATE OF PURCHASE	ORIGINAL PRICE	LATEST PRICE	16	17	18
				USDOT# Vehicle Level	FEIN/TIN Vehicle Level	*** Safety Resp Change Y/N

(For Office Use Only)

IRP Account Number

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Fleet Number

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1. Indicate with an "X" in box(s) below the method(s) used to declare distance:

☐ Actual miles operated for preceding July 1 thru June 30 time period.

☐ Use North Dakota's average per vehicle distance chart.

JURISDICTION	MILEAGE	WEIGHT
AK (Alaska)		
AL (Alabama)		
AR (Arkansas)		
AZ (Arizona)		
CA (California)		
CO (Colorado)		
CT (Connecticut)		
DC (District of Columbia)		
DE (Delaware)		
FL (Florida)		
GA (Georgia)		
IA (Iowa)		
ID (Idaho)		
IL (Illinois)		
IN (Indiana)		
KS (Kansas)		
KY (Kentucky)		
LA (Louisiana)		
MA (Massachusetts)		
MD (Maryland)		
ME (Maine)		
MI (Michigan)		
MN (Minnesota)		
MO (Missouri)		
MS (Mississippi)		
MT (Montana)		
NC (North Carolina)		
ND (North Dakota)		
NE (Nebraska)		

JURISDICTION	MILEAGE	WEIGHT
NH (New Hampshire)		
NJ (New Jersey)		
NM (New Mexico)		
NV (Nevada)		
NY (New York)		
OH (Ohio)		
OK (Oklahoma)		
OR (Oregon)		
PA (Pennsylvania)		
RI (Rhode Island)		
SC (South Carolina)		
SD (South Dakota)		
TN (Tennessee)		
TX (Texas)		
UT (Utah)		
VA (Virginia)		
VT (Vermont)		
WA (Washington)		
WI (Wisconsin)		
WV (West Virginia)		
WY (Wyoming)		
AB (Alberta)		
BC (British Columbia)		
MB (Manitoba)		
NB (New Brunswick)		
NL (Newfoundland)		
NS (Nova Scotia)		
NT (NW Territories)		
ON (Ontario)		
PE (Prince Edward Island)		
QC (Quebec)*		
SK (Saskatchewan)		
YT (Yukon)		
MX (Mexico)		
Total Fleet Miles		

(For Office Use Only)
IRP Account Number

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Fleet Number

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*QC
Requires the number of
axles (2-6) for the
combination of vehicles
(tractor-truck-trailer)

INTERNATIONAL FUEL TAX LICENSE APPLICATION AND REINSTATEMENT

North Dakota Department of Transportation, Motor Vehicle
SFN 17105 (2-2018)

MOTOR VEHICLE DIVISION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE SUITE 103
BISMARCK ND 58505-0791
Telephone (701) 328-1287
Fax (701) 328-3500
Website: <https://dot.nd.gov>

Please Print or Type. See Instructions on Reverse Side.

1. ND IFTA Account Number

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2. IRP Account Number

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3. US DOT Number

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Please Print or Type

4. Application Type (check one) ☐ Original ☐ Amendment ☐ Reinstatement		5. Business Type (check one) ☐ Individual ☐ Partnership ☐ Corporation	
6. Applicant Name		7. Trade/DBA Name (if different than legal name)	
8. Business Address			
City		State	Zip Code
9. Applicant's Mailing Address		E-Mail Address	
City		State	Zip Code
10. Contact Person Name		Area Code - Telephone Number	
11. Federal Employer Identification Number (FEIN)		12. Social Security Number (Only if no FEIN)	
13. Previous IFTA License (Indicate jurisdictions in which you had a prior IFTA License)			
14. Bulk Storage (indicate jurisdictions in which you maintain bulk storage)		16. License Types ☐ Commercial ☐ Farm ☐ Prorate	
15. Application Type (check one) ☐ (D) Diesel ☐ (G) Gasoline ☐ (P) Propane ☐ (G) Gasohol ☐ (NG) Natural Gas ☐ (BD) Biodiesel			
Fee Calculation, Fuel Decal Request:			
A. Number of vehicles requiring fuel decals:		X \$1.00 = (See Instruction A on Reverse Side) decals \$	
B. License Fee (original)		\$	5.00
C. Original Application or Reinstatement Fee		\$	20.00
D. TOTAL Enclosed		\$	

When ordering additional decals during the year, card fees are \$3.00.

CERTIFICATION: I certify to the best of my knowledge the information and statements on this application are true and correct. I agree to comply with reporting, payment, record keeping and display requirements as specified by the International Fuel Tax Agreement. I further agree that North Dakota may withhold any funds due me if I become delinquent in payment of fuel taxes, whether due North Dakota or any IFTA member jurisdiction. I also understand that failure to comply with these provisions shall be grounds for revocation of my fuel tax license in all member jurisdictions.

I certify with my signature that, to the best of knowledge, the information is true, accurate, and complete and any falsification subjects me to appropriate civil and/or criminal sanction of the base jurisdiction. (e.g., perjury).

Make check payable to: NDDOT.

Your fuel license decals will be sent to your business address.

Applicant Title

Signature of Applicant

Date

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INSTRUCTIONS

1. **North Dakota Account Number:** Complete only if you are reinstating your account. List account number previously assigned.
2. **IRP Account Number:** List International Registration Plan account number issued by North Dakota.
3. **US DOT Number:** List number issued by the Federal Motor Carrier Safety Administration (FMCSA).
4. **Application Type:**
Original - provides us with general information about your business.
Amendment - permits you to update your name, address, telephone, order replacement license, or purchase additional decals.
Reinstatement - restores your account to good standing.
5. **Business Type:** Your business structure; (Sole Proprietor, Partnership, or Corporation).
6. **Applicant Legal Name:** The name used on Income Tax Returns and the name used when you applied for your Federal Employer Identification Number or your Social Security Number.
7. **Trade/Doing Business As (DBA):** The business name under which you operate. (Complete only if different than legal name).
8. **Business Address:** The physical address where operational control and records to be audited are kept for the licensee's vehicles.
9. **Mailing Address:** Complete only if different than business address. (All correspondence will be sent to this address.)
10. **Contact Person:** The name of the person who is filing your fuel tax return with us, or, the person we may contact for information about your returns. Please provide telephone number where they may be reached Monday-Friday, 7:45 a.m.-4:30 pm. (List the name of your permitting agent if applicable.)
11. **Federal Employer Identification Number (FEIN):** Also referred to as the taxpayer identification number and is issued by the IRS (Also, see Item 9).
12. **Social Security Number:** Complete only if you are a sole proprietor with no employees and you are not required by the IRS to hold a FEIN.
13. **Previous IFTA License:** Indicate jurisdictions in which you had a prior IFTA License.
14. **Bulk Storage:** Indicate ALL member states in which you maintain bulk storage facilities.
15. **Fuel Types:** Indicate which type(s) of fuel your vehicles use.
16. **License Type(s):** Commercial - North Dakota only
Farm - Farm use
Prorate - Interstate
Travel

Fuel Calculation (Fuel Decal Request)

Number of vehicles requiring fuel decals: Each "qualified motor vehicle" that is to be operated in North Dakota must display IFTA decals. A qualified motor vehicle is a motor vehicle used, designed, or maintained for transportation of persons or property and:

- 1) has two axles and a gross weight exceeding 26,000 pounds, or;
- 2) has two axles and a registered weight exceeding 26,000 pounds, or;
- 3) has three or more axles regardless of weight, or;
- 4) is used in combination and the gross weight of the combined vehicles exceeds 26,000 pounds. Qualified motor vehicle does not include recreational vehicles.

A. **Decal Fee:** A fee of \$1.00 per vehicle will be charged. If ordering additional decals during the year, add \$3.00 card fee.

B. **License Fee:** A \$5.00 license fee is charged on original and renewal applications.

C. **Application or Reinstatement Fee:** A \$20.00 handling fee is charged on original and reinstatement applications.

D. **Total Fee:** Add A, B, and C to arrive at a total fee.

Signature: This application must be signed and dated by an owner, partner, or authorized representative.

AGREEMENT TO MAINTAIN RECORDS FOR IRP AND IFTA

North Dakota Department of Transportation, Motor Vehicle
SFN 60450 (5-2024)



MOTOR VEHICLE DIVISION
MOTOR CARRIER SECTION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE STE 103
BISMARCK ND 58505-0791
Telephone (701) 328-1287
Website: <https://dot.nd.gov>

US DOT Number

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IRP Account Number

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ND IFTA Account Number

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Carrier/Company Name

Physical/Street Address

City

State

ZIP Code

RECORDKEEPING REQUIREMENTS: You must maintain records on each vehicle for **every** trip. All miles must be accounted for. Audits are completed using receipts and records provided by the licensee (records must be detailed enough to enable trips to be recreated and support each trip's jurisdictional miles). Therefore, the burden of proof in an audit is on the licensee. Vehicle Tracking Systems (VTS) or driver prepared records must comply with the record-keeping requirements established by IFTA and IRP. If VTSs are used for IFTA and IRP record-keeping, ensure they are compliant with IFTA and IRP requirements and retention periods.

DISTANCE RECORDS (IFTA and IRP): Driver prepared records must include:

- Date of trip (starting and ending)
- Trip origin and destination
- Route of travel (including intermediate stops & highway numbers)
- Beginning and ending reading from the odometer, hubodometer, or engine control module (ECM) for the trip
- Vehicle fleet number (for multiple fleets)
- Total trip distance
- Unit number or vehicle identification number (VIN)
- Distance by jurisdiction (reading at jurisdictional lines)
- Monthly, quarterly, and annual summaries by unit and fleet

DISTANCE RECORDS (IFTA and IRP): Vehicle Tracking System records must be accessible in an electronic spreadsheet format or delimited text file and include:

- System readings at least every 10 minutes (IFTA) / 15 minutes (IRP)
- Date and time of each system reading
- Latitude and longitude of each system reading to include a minimum of 4 decimal places
- Odometer reading for each system reading
- Unit number or vehicle identification number (VIN)
- Monthly, quarterly, and annual summaries by unit and fleet

FUEL RECORDS (IFTA only): You must maintain original fuel source documents (**receipts**) for each fuel type for each vehicle. Over the road fuel purchases and bulk fuel purchases are to be accounted for separately. Monthly and quarterly summaries by unit and fleet must be prepared. An acceptable fuel receipt or invoice must include:

- Date of purchase
- Name and address of the seller of the fuel
- Number of gallons/liters of fuel purchased
- Fuel type
- Price per gallon/liter
- Unit number or vehicle identification number (VIN)
- Purchasers name

Bulk storage facility and withdrawal records must include the following in order to receive tax paid credit:

- Receipts for all deliveries of bulk fuel
- Purchase records showing tax was paid
- Quarterly inventory reconciliations
- Location and capacity of bulk tank
- Bulk withdrawal records including all IFTA & non-IFTA units' withdrawals that include the following:
 - Date of withdrawal
 - Quantity of fuel withdrawn
 - Fuel Type
 - Unit number or VIN

RECORDS RETENTION: All records pertaining to IFTA must be kept for four years, including unused decals. Every quarter an IFTA return must be filed summarizing distance traveled and fuel purchased for all your qualified vehicles, even if no operations were conducted. Failure to maintain complete records could result in disallowing all tax paid credit and reduction of reported MPGs by 20% or to a 4.0 MPG for IFTA. All records pertaining to IRP distance records must be retained to support the reported distance for the current registration year and the three previous registration years to include the reporting period for each of the 3 registrations years. A total of up to 7 years may be required. Failure to make records available or provide adequate records for audit may result in an assessment of 20% of the Apportionable Fees paid by the Registrant for the Registration Year to which the records pertain. In an instance where the Registrant has a second such offense, the assessment will be 50%. In an instance where the Registrant has a third offense, the assessment will be 100%.

DECLARATION: The undersigned has read this document and agrees to maintain records and report information in accordance with the most current IRP and IFTA requirements.

Printed Full Name	Title								
Signature of Applicant	Date <table border="1"><tr><td></td><td></td></tr></table> / <table border="1"><tr><td></td><td></td></tr></table> / <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table>								

APPLICATION FOR CERTIFICATE OF TITLE & REGISTRATION OF A VEHICLE

North Dakota Department of Transportation, Motor Vehicle
SFN 2872 (7-2021)

MOTOR VEHICLE DIVISION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0780
Telephone (701) 328-2725
Website: <https://dot.nd.gov>

I. This Application is for:

(Check only one) SEE INSTRUCTIONS ON REVERSE SIDE.

- ☐ Title Process
☐ Vehicle Registration
☐ Registration Change - Reason:
☐ Utility Trailer License \$5
☐ Permanent Trailer Plate - Check one: ☐ Farm ☐ Semi

REQUIRED: Reason for Duplicate (Circle: lost, stolen, mutilated)

- ☐ Duplicate plates, tabs & registration card \$5.00
☐ Duplicate tabs & registration card \$3.00
☐ Duplicate registration card only \$2.00
☐ Duplicate title \$5.00

DO NOT SEND CASH

II. Applicant Information

Applicant's Legal Name ☐ Individual (first, middle, last) ☐ Business ☐ Lessor ☐ Trust ☐ Govt.		☐ Driver's License ☐ FEIN		Telephone Number
Mailing Address	City	State	ZIP Code	County
Co-Applicant's Legal Name ☐ Individual (first, middle, last) ☐ Business ☐ Lessee ☐ Trust ☐ Govt.		☐ Driver's License ☐ FEIN		Telephone Number
Mailing Address	City	State	ZIP Code	County
Must Check One (If Co-Applicant is included on application) ☐ Or ☐ And ☐ And/Joint Tenants with Right of Survivorship			☐ Vehicle is Leased	
		North Dakota Title Number		

III. Vehicle Information

Year	Make	Model	Body Style	
Vehicle Identification Number		Fuel Type ☐ Electric ☐ Plug-In Hybrid ☐ Other	Color	
Weight	Previous Weight	Motor Home/Trailer Length	ND License Plate Number	Credit Plate Number
Date 1st used on ND Highways	ATV/UTV Only ☐ Straddle ☐ Side by Side	Odometer Reading	Odometer Indicator (Check One) ☐ Actual Mileage ☐ Exceeds Mechanical Limits ☐ Not Actual	

IV. Motor Vehicle Purchaser's Certificate

Full Purchase Price (less Rebate)	
Less Trade-In Allowance	
Less Total Loss Allowance	
Difference / Subtotal	
Tax (5% of Difference / Subtotal)	
Abandoned Vehicle Disposal Fee (\$1.50)	
Title Fee (\$5.00)	
Vehicle License Fee	
SRP (\$25.00)	
License Plate Credit Amount	
Plate or Credit Transfer Fee (\$5.00)	
Branch Fee	
Duplicate Plate Fee (\$5.00)	
TOTAL FEES DUE: DO NOT SEND CASH	
Year and Make of Trade-In	
VIN of Trade-In	
☐ Tax Exempt (see instructions on reverse)	

V. Dealer and Lienholder Information

Date Acquired	Check One ☐ New Vehicle ☐ Used Vehicle	
Acquired From	ND Dealer No.	
First Lienholder		
Mailing Address		
City	State	ZIP Code

VI. PENALTY: Any person making any false statement on this application for license or title for which another penalty is not specifically provided is guilty of a class B misdemeanor.

NDCC Chapters 39-04 and 39-05. Applicant certifies this vehicle will be insured as required by law. The applicant, under penalties of law and as rightful owner of the vehicle described on this application declares that the information set forth is correct.

If vehicle is company owned, company name and title of authorized agent signing the application must be noted.

NDCC Chapter 57-40.3-08. Submitting this application presumes this vehicle is being driven on North Dakota streets and highways.

Signature	Date
Business Name (If applicable)	

ATTENTION TRUCK OWNERS HAULING HAZARDOUS MATERIALS:
I declare, with my signature on this application that I am knowledgeable of the Federal or State Motor Carrier and Hazardous Materials Safety Regulations.

(CONTINUATION OF MOTOR VEHICLE PURCHASER'S CERTIFICATE)

If vehicle is exempt from tax, enter number corresponding to exemption in Section IV. (front of this form)

1. Gift from: ☐ Spouse ☐ Parent(s) ☐ Child ☐ Sibling(s)
☐ Grandparent(s) ☐ Grandchild
 Gift to (Specify relationship between ALL NEW owners)
2. Joint Tenants with Right of Survivorship and now vehicle is being put in one name only
3. Inheritance
4. Change of name by: ☐ Marriage ☐ Adoption ☐ Court Order
5. Vehicle acquired through a lease purchase agreement (Check one)
 - ☐ A. If tax was paid on the total lease consideration, tax is due on the lease buyout amount.
 - ☐ B. If tax was paid on the full purchase price and you have been in possession of the vehicle over one year, no tax is due.
 - ☐ C. If tax was paid on the full purchase price and you have been in possession of the vehicle for less than one year, tax is due on the lease buyout amount.
6. State Fleet
7. Lien change --- CURRENT ODOMETER READING
8. Interstate carriers --- Account Number:
9. Tax paid to state that grants reciprocity to North Dakota (Proof required)
10. Public Transportation provided under contract with NDDOT
11. Dealer resale - USED vehicle
12. Dealer resale - NEW vehicle
13. Tribal (SFN 18085 required)
14. Disabled American Veteran or Former Prisoner of War - Letter of Eligibility from the Department of Veteran's Affairs is required
15. Nonprofit senior citizens' or mobility impaired persons' corporation owned vehicle used for the transportation of the elderly or disabled
16. Mobility impaired person(s) purchasing specially equipped vehicle
17. Homemade vehicle
18. Newly formed ☐ Partnership ☐ Corporation (Check One)
 Date formed:
19. Dissolved ☐ Partnership ☐ Corporation (Check One)
 Date dissolved:
20. Parochial or private non-profit school buses
21. Assembled vehicles by motor vehicle dealer (SFN 21859 required)
22. Transfer into family trust
23. Military home of record: ☐ Entry ☐ Discharge (SFN 17147 required)
24. Mobile Home (SFN 3004 required) or Manufactured Home (SFN 53658 required)
25. North Dakota political subdivisions
26. Repossession (SFN 2880 required)
27. Non-resident military lease
28. Total loss settlement or Salvaged
29. Other - Specify
30. Spousal Transfer due to Divorce (copy of divorce decree required)

VIII. Damage Disclosure NDCC 39-05-17.2

The damage disclosure law includes passenger cars, trucks, pickup trucks, motorcycles, and motor homes that are less than nine years old. It EXCLUDES all trailers, off-highway vehicles, and snowmobiles. A Damage/Salvage Disclosure Statement (**SFN 18609**) must be completed. Motor vehicle body damage disclosure requirements apply only to the transfer of certificate of title on vehicles less than nine (9) model years old.

If applicable, please submit SFN 18609 Damage Disclosure Statement with this application.

Any person who makes a false statement on this form is guilty of a Class A Misdemeanor.

Instructions:**SECTION NO.**

- I. Check the type of application you are submitting (check only one).
- II. Complete applicant information in **FULL** for each owner.
- III. Complete **ALL** applicable vehicle information. Odometer reading required on all vehicles 2011 and newer.
- IV. Complete **ALL** applicable purchaser's certificate information.
 - Abandoned vehicle disposal fee of \$1.50 is due on all new and out-of-state passengers, trucks, buses, and motorhomes when first titled in North Dakota.
 - Title fee is \$5.00.
 - Enter license fee and pay applicable plate credit using the appropriate fee schedule.
 - If applying plate credit, enter \$5.00 plate transfer fee.
 - If a trade allowance, year, make, and VIN are required.
 - Enter the appropriate tax exemption number if an exemption for tax is claimed (see tax exemptions Section VII).
- V. Complete **ALL** applicable dealer and lienholder information. If needing to add a second lienholder complete SFN 2475 Part 3: Purchaser's Certification and Application to **include all lienholders**.
- VI. Application must be signed with applicant's legal signature and dated.
- VII. Applicable tax exemptions.
- VIII. Damage Disclosure statement SFN 18609 must be completed for all vehicles less than nine (9) model years old.

DAMAGE/SALVAGE DISCLOSURE STATEMENT

North Dakota Department of Transportation, Motor Vehicle
SFN 18609 (8-2019)

MOTOR VEHICLE DIVISION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0780
Telephone (701) 328-2725
Fax (701) 328-1487
Website: <https://dot.nd.gov>

This form **MUST** be completed by the transferor (seller) for all vehicles less than nine (9) model years old.

This form **MUST** be signed by the transferor (seller), given to and signed by the transferee (buyer), and accompany the application for title.

Year	Make	Model	Style
Vehicle Identification Number (VIN)			Title Number

Section 1: NDCC 39-05-17.2

Within the past eight (8) years, has this vehicle sustained body or structural damage from a vehicular crash or accident, including loss by fire, vandalism, weather, or submersion in water, resulting in damage to the motor vehicle? ☐ Yes* ☐ No

The term damage does not include body or structural modifications, normal wear and tear, glass damage, hail damage, or items of normal maintenance and repair.

*** If yes is checked, sections 2 & 3 must be completed.**

Section 2: NDCC 39-05-20.2 & 37-09-01-02

If vehicle has sustained damage, please answer the following question:

Do the damages equal or exceed the greater of \$10,000 or twenty-five percent (25%) of the pre-damage retail value of the motor vehicle as determined by the National Automobile Dealers Association official used car guide? ☐ Yes ☐ No

Section 3: NDCC 39-05-20.2 & NDAC 37-09-01-02

If the vehicle has sustained damage, please answer the following question:

Do the damages exceed seventy-five percent (75%) of its retail value? ☐ Yes* ☐ No

3A. *If you answered yes, please check the box below that best describes your situation.

☐ Damage occurred in a single occurrence while I owned the vehicle.

☐ I acquired the vehicle with unrepaired damage.

☐ Damage occurred prior to my ownership and I acquired it in a repaired condition.

☐ Other - Must explain:

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**3B. Type of Damage:
(check all that apply)**

☐ Collision

☐ Weather

☐ Theft

☐ Interior

☐ Water

☐ Vandalism

☐ Fire

☐ Under Carriage

☐ Other

Explanation of Damage:

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Any person who makes a false statement on this form is guilty of a Class A Misdemeanor.

Section 4

Name of Transferor (Seller)		Daytime Telephone Number	
Mailing Address	City	State	ZIP Code
Signature of Transferor (Seller)			Date

Section 5

Legal Name of Transferee (Buyer)		Daytime Telephone Number	
Mailing Address	City	State	ZIP Code
Signature of Transferee (Buyer)			Date

INSTRUCTIONS FOR COMPLETING DAMAGE/SALVAGE DISCLOSURE STATEMENT

Section 1

The seller must disclose if there has been damage* to the vehicle within the past 8 years by checking YES or NO to the question.
If YES, proceed to Sections 2 & 3.

**Damage is defined as body or structural damage from a vehicular crash or accident including loss by fire, vandalism, weather, or submersion in water, resulting in damage to the motor vehicle. The term damage does NOT include body or structural modifications, normal wear and tear, glass damage, hail damage, or items of normal maintenance and repair.*

Section 2

The seller must disclose if damages* equal or exceed the greater of \$10,000 or twenty-five percent (25%) of the pre-damage retail value of the motor vehicle by checking YES or NO to the question.

**The amount of damage to a motor vehicle is determined by adding the retail value of all labor, parts, and materials used in repairing the damage. See NDCC 39-05-17.2 for further information on calculating the Assessed Damage of a vehicle.*

DAMAGE DISCLOSURE FORMULA	
1. Calculate 25% of the retail value of the vehicle at the time the vehicle was damaged.	
2. Which is the higher amount 25% of the retail value of the vehicle or \$10,000?	
3. What is the amount of the assessed damage?	
4. The assessed damage amount must be greater than the higher amount from step 2 to be a damaged vehicle.	
EXAMPLE 1	EXAMPLE 2
1. \$15,000 (retail value) X 25% = \$3,750	1. \$50,000 (retail value) X 25% = \$12,500
2. \$3,750 OR \$10,000 = \$10,000 is higher	2. \$12,500 OR \$10,000 = \$12,500 is higher
3. Assessed damage is \$7,000	3. Assessed damage is \$13,000
4. Check NO on damage disclosure form	4. Check YES on damage disclosure form

Section 3

The seller must disclose if the damages* exceed seventy-five percent (75%) of the motor vehicles retail value by checking YES or NO to the question.

If YES, seller must answer Sections 3a. & 3b.

**Vehicles damaged in excess of 75% may not be operated on ND highways unless they have been reconstructed and inspected by a business that is registered with the Secretary of State, is in good standing, and offers motor vehicle repairs to the public. (SFN 2486 Certificate of Vehicle Inspection) The business completing the inspection may not be the same business that reconstructed the vehicle. If a vehicle has been reconstructed, a certificate of title will be issued with a "previously salvaged" brand status. Salvage requirements apply to all model year vehicles and all brands must be carried forward regardless of the age of the vehicle.*

Section 3a

The seller must select one of the options which best describes their ownership of the vehicle in regards to the disclosed damage. Example of "Other": Title already branded for the damage disclosed above.

Section 3b

The seller must select all that apply which best describes the type of damage to the vehicle and briefly explain. Example of "Explanation of Damage": Hit a deer.

Section 4

Seller information to be completed in full with seller signing and dating the form.

Section 5

The buyer is only required to complete Section 5 if YES has been answered to any of the questions completed by the seller.

Carrier Information

Carrier/Company Name	IRP Account Number	IFTA Account Number
Please select which account(s) the service bureau will be handling: ☐ IRP ☐ IFTA		

Service Bureau Information

Service Bureau Name		Agent Name	
Address		City	State ZIP Code
Contract Telephone Number	Fax Number	Email Address	

Carrier authorizes the above listed service bureau/acting agent to perform transactions online for the specified account listed above.

Carrier Signature	Date
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