



New York State Department of Motor Vehicles
SNOWMOBILE REGISTRATION APPLICATION

PLEASE PRINT WITH BLUE OR BLACK INK

www.nysdmv.com

FOR OFFICE USE ONLY	
Batch (File No.)	
<input type="checkbox"/> Original	<input type="checkbox"/> Activity
<input type="checkbox"/> Renewal	<input type="checkbox"/> Duplicate

OFFICE USE ONLY	Registration Number	3 of Name		New Reg. Number	SPECIAL CONDITIONS: NF OV PA SV XR				
	Pool Plate	Sales Tax Information	Status	Value (\$)	Jurisdiction	Rate	Out of State	Audit	

DEALER ONLY	THIS SECTION MUST BE COMPLETED ONLY BY A REGISTERED NEW YORK STATE SNOWMOBILE DEALER								
	If you are registering this snowmobile for someone who does not live in NY, and the snowmobile is already registered in the customer's home jurisdiction, DO NOT ASSIGN A REGISTRATION DECAL . Motor Vehicles office staff will assign a registration number when the application is processed. Snowmobiles registered in another jurisdiction are required to display the numbers assigned by the home jurisdiction on the snowmobile's cowling.								
	If a registration decal is issued, write the decal registration number in this box: <input type="text"/> Please copy the decal number carefully. Errors will delay processing of the application.								
	If the snowmobile already has a valid NY registration, make sure the number is correctly entered in the "NY Registration No." in box 2 below.								
	Date Temp. Reg. Issued	Date of Sale			Date Sent to DMV Office				
Dealer Name				Dealer Facility Number					

INSTRUCTIONS → COMPLETE BOXES **1**, **2** and **4**. COMPLETE BOX **3** ON PAGE 2 ONLY IF NECESSARY. PLEASE PRINT CLEARLY.

WHAT DO YOU WANT TO DO?

1 REGISTER this snowmobile in registrant's name for the first time RENEW a registration
 CHANGE information on registration REPLACE a registration: Document Stickers

2 CLIENT ID NO. (from Driver License of first registrant listed below)

<input type="checkbox"/> NAME CHANGE? (See Box 3 on page 2.)	<input type="checkbox"/> YES <input type="checkbox"/> NO	ADDRESS CHANGE?	<input type="checkbox"/> YES <input type="checkbox"/> NO	Is this registration for a corporation or partnership?	<input type="checkbox"/> Yes <input type="checkbox"/> No
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NAME OF REGISTRANT (Last, First, Middle)

How was the snowmobile obtained? New Leased New Used Leased Used

DATE OF BIRTH: Month Day Year DAY PHONE NO. (Optional) Area Code SEX: M F

ADDRESS WHERE YOU GET YOUR MAIL (Include Street Number and Name, Rural Delivery and/or box number)

<input type="text"/>	Apt. No.	City or Town	State	Zip Code	County
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ADDRESS WHERE YOU LIVE (IF DIFFERENT FROM MAILING ADDRESS) - DO NOT GIVE P.O. BOX

<input type="text"/>	Apt. No.	City or Town	State	Zip Code	County
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Is this snowmobile already registered in NY? Yes No If "YES", enter NY Registration No.

SNOWMOBILE IDENTIFICATION NUMBER YEAR MAKE

COLOR CC OR HP USE Pleasure Dealer Rental Commercial Government Emergency

NYS COUNTY OF PRIMARY USE

OFFICE USE ONLY	Prior Owner <input type="text"/>	Old Owner <input type="text"/>	Stop/Response <input type="text"/>
	Approved by: <input type="text"/>	Date: <input type="text"/>	Operator Signature <input type="text"/>
	Proof Submitted (Name and Ownership)		
Name: <input type="text"/>		Ownership: <input type="checkbox"/> MCO <input type="checkbox"/> Registration <input type="checkbox"/> Bill of Sale	
<input type="checkbox"/> Driver License		<input type="checkbox"/> Other: <input type="text"/>	
<input type="checkbox"/> Other: <input type="text"/>		<input type="checkbox"/> Other: <input type="text"/>	

3 TO CHANGE information on your **current** snowmobile registration:

For a change of **name**, print your former name exactly as it appears on the registration you now have.

For a change **other** than name, tell us what the change is, and the reason for the change.

4 **CERTIFICATION:** The information I have given on this application is true to the best of my knowledge. I certify that the snowmobile is fully equipped as required by the Vehicle and Traffic Law. If I am applying for replacement registration items, I certify that the registration is not currently under suspension or revocation. *If I am using a credit card for payment of any fees in connection with this application, I understand that my signature below also authorizes use of my credit card.*

Print Name Here ▶ _____ **Sign Here** ▶ _____
(Print Name in Full - if registering for a corporation, print your full name and title) (Sign Name in Full)

Additional Signature SIGN HERE ▶ _____
(Sign Name in Full - Additional signature required for a partnership or if registering this vehicle in more than one name.)

CREDIT CARD AUTHORIZATION IF CARDHOLDER IS NOT THE APPLICANT:

My signature authorizes _____ **Sign Here** ▶ _____
 to use my credit card for payment of any fees in connection with this application. (Cardholder-Sign Name in Full)

IMPORTANT: Making a false statement in any registration application or in any proof or statements in connection with it, or deceiving or substituting in connection with this application, is a misdemeanor under Section 392 of the Vehicle and Traffic Law, and may also result in the revocation or suspension of the registration pursuant to regulations established by the Commissioner. The Department makes no representation that it will issue a transferable registration until all documentation required to establish ownership of the snowmobile is submitted and deemed to be satisfactory. Pending review of this application, neither the Commissioner of the Department of Motor Vehicles nor any of his or her employees, deputies or agents assumes any liability or responsibility for repairs performed, improvements made or work done to the snowmobile referenced in this application.

TO BE COMPLETED ONLY BY A REGISTERED NEW YORK STATE SNOWMOBILE DEALER

DEALER TRANSFER INFORMATION – Please complete the information below. For new snowmobiles, attach a Manufacturer's Statement or Certificate of Origin (MSO or MCO) and a bill of sale. For used snowmobiles, attach a signed title or transferable registration, along with bills of sale for any subsequent transfers of ownership.

Snowmobile was obtained from _____ Name _____ Date of Purchase From Previous Owner _____

Snowmobile was sold by _____ Address _____
 _____ Dealership Name _____ Facility No. _____ Date of Sale _____

Address of your Dealership _____

DEALER CERTIFICATION

I certify that all information provided on this application is true. I take responsibility for the integrity of the papers delivered to the Department of Motor Vehicles.

▶ _____ Signature of Dealer or Authorized Representative _____ Print Dealer Name _____

DEALER ONLY: **If you are issuing** a Temporary Certificate of Snowmobile Registration (MV-53SN), please mail this completed application form and required paperwork, **within 5 days, to:**

Department of Motor Vehicles
 Syracuse District Office
 620 Erie Blvd. West
 Syracuse NY 13204

If you are **not** issuing a temporary registration, bring this application to **any** Motor Vehicles office for processing.