



Phone: (603) 887-3636

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NEW VEHICLE REGISTRATION

Vehicle Registrant's Information:

Name:	
Street Address:	
Mailing Address:	
Telephone Number:	
Email Address:	

I, _____ request to register a _____
Print Full Name *Year* *Make* *Model*
 and request this plate type _____ (Passenger, Conservation, State Park, Vanity).

**For vanity plates please include an application for Initial Plates found on the Town Clerk's page under the Forms Library option or by visiting the State of NH, Dept. of Motor Vehicles website.*

CHECKLIST OF DOCUMENTATION NEEDED TO COMPLETE TRANSACTION

- Properly executed title* or Certified Title Application (from a dealer) for new car
- Bill of Sale
- Copy of government issued ID
- Payment for amount owed (make checks payable to *Town of Chester*)

ESTIMATES: Go to www.chesternh.org → online payments → registration estimates

*Titles should be signed and dated by the "Seller" and include the current mileage at the time of purchase. You (the Buyer) should also fill out the sections pertaining to "Buyer" and be sure to sign and date where applicable.

By signing this form, I attest the above information is included and is necessary for this transaction.

I understand if any of this information is not included, my transaction will not be processed and my information will be sent back to me. _____

Signature of Registrant