

Instructions: Review, complete, and return all pages from this packet to the Motor Carrier Section via email at [motorcarrier@nd.gov](mailto:motorcarrier@nd.gov) or via fax at (701) 328-3500

<b>Contact Person Name:</b>	
<b>Email:</b>	<b>Phone:</b>
<b>Mailing Address:</b>	
<b>Physical Address:</b>	
<b>Desired Effective Date:</b>	

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

3 items from the following list if you are opening the account in your **personal name**. The proofs of residency below must have your name and a ND physical address (a PO box is not allowed). Check the 3 that you are sending in:

- Copy of your North Dakota driver's license
- Utility, gas, cable, or phone bill
- Rental agreement (if renting)
- Real estate tax report (if property is owned)
- State or Federal income tax return
- Copy of a ND vehicle title (other than the one being added to your prorate account)
- Insurance card
- Medical card
- Letter from the IRS or FMCSA

If you are opening the account in a **Business name**, we need:

- A North Dakota Secretary of State filing **and** 2 additional documents from this list:
  - Proof that the principal owner is a resident of North Dakota (clear copy of applicant's drivers license)
  - Proof of the business' federal income tax returns have been filed from an address in North Dakota
  - Proof that the business owner has paid personal income taxes to North Dakota
  - Proof that the business has paid real estate or property taxes to North Dakota
  - Proof that the business receives utility bills in North Dakota in the business name
  - Proof that the business has a vehicle titled in North Dakota in the business name

**Step 2:** Are you operating under your own USDOT number or someone else's? USDOT number status must be listed as **Active** and the Carrier Operation status must be marked as **Interstate**

- My own USDOT number: \_\_\_\_\_
- Someone else's USDOT number: \_\_\_\_\_  
A copy of the lease agreement must also be submitted.

**Step 3:** What is your Employer Identification Number (EIN) from the IRS? If you do not have one yet, you can request this online at [www.irs.gov](http://www.irs.gov).

EIN: \_\_\_\_\_

**Step 4:** Complete the attached Schedule A (SFN 2477) – **all** pages must be completed and returned.

- If your truck has a ND title and is not changing ownership, we **also need** a copy of the IRS-2290 if the registered weight is 55,000 lbs. or higher
- If your truck has an out-of-state title and is not changing ownership, we need a clear copy of the front and back of the title **and** the 2290 if the registered weight is 55,000 lbs. or higher
- If you have purchased a truck and the title is not yet in your name we will need:
  - The original title mailed or dropped off in the Bismarck Motor Carrier office
  - A title application
  - Damage disclosure if vehicle is less than 9 years old
  - A 2290 if the registered weight is 55,000 lbs. or higher unless the purchase was within the last 60 days

**Step 5:** Complete the attached application SFN 17105 for an IFTA (International Fuel Tax Association) license.

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

**Step 7:** Read the manuals for IRP and IFTA. Initial below indicating you have read the manuals.

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:** Review the IRP record keeping requirements in Article X of the IRP Plan. Initial below indicating you have read the recordkeeping requirements.

Initial: \_\_\_\_ IRP Recordkeeping reviewed  
[https://cdn.ymaws.com/www.irponline.org/resource/resmgr/jurisdiction\\_info\\_2/the\\_plan\\_1\\_1\\_19.pdf](https://cdn.ymaws.com/www.irponline.org/resource/resmgr/jurisdiction_info_2/the_plan_1_1_19.pdf)

**Step 9:** Review the IRP record keeping requirements in section P500 of the IFTA procedures manual. Initial below indicating you have read the recordkeeping 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

**Step 11:** Set up your online account access <https://apps.nd.gov/dot/cvisn/login.htm>

Submitted by: (print)	Signature and initials	Date

# INTERNATIONAL REGISTRATION PLAN ORIGINAL APPLICATION (SCHEDULE A)

North Dakota Department of Transportation, Motor Vehicle  
SFN 2477 (10-2018)



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>

US DOT Number

FEIN/TIN

IRP Account Number

Fleet Number

License Year

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Carrier Name		
DBA Name		
Business Street Address		
City	State	Zip Code
Mailing Address		
City	State	Zip Code

<input type="checkbox"/> March 31
<input type="checkbox"/> June 30
<input type="checkbox"/> September 30

**Please select one:**  
This will determine when your registration expires

<input type="checkbox"/> Household Goods Carrier
<input type="checkbox"/> Private Carrier
<input type="checkbox"/> Haul for Hire

**Please select one:**  
This is your type of operation

## Contact Person

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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Date  /  /



Please indicate the weights in the weight column for what you'd like to be licensed for. If you are going to license 80,000 lbs. for all jurisdictions, please just write 80,000 in the weight box for ND. If you'd like to license heavier for some jurisdictions, just fill those heavier weights in and we will put all other justifications at the minimum of 80,000 lbs.

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)		
<b>Total Fleet Miles</b>		

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)



## 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 (9-2018)



MOTOR VEHICLE DIVISION/IRP  
ND DEPT OF TRANSPORTATION  
608 E BOULEVARD AVE STE 103  
BISMARCK ND 58505-0791  
Telephone (701) 328-1287  
Fax (701) 328-3500  
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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Company Name

Mailing 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. Therefore, the burden of proof in an audit is on the licensee. Electronic or driver prepared records must comply with the recordkeeping requirements established by IFTA and IRP. If ELDs are used for IFTA and IRP recordkeeping, ensure they are compliant with IFTA and IRP requirements and retention periods.

**DISTANCE RECORDS (IFTA and IRP):** Electronic or driver prepared records must include:

- Date of trip (starting and ending)
- Trip origin and destination
- Route of travel (highway numbers)
- Beginning and ending odometer/hubometer, ECM for the Trip
- Vehicle fleet number (for multiple fleets)
- Total trip distance
- Unit number or vehicle identification (VIN)
- Distance by jurisdiction (reading at jurisdictional lines)
- 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 seller
- Number of gallons purchased
- Fuel type
- Price per gallon
- Unit number or vehicle identification (VIN)
- Purchasers name

Bulk storage fuel purchases must be supported by delivery tickets and/or receipts. You must also have a reliable meter on your bulk tank. To receive tax paid credit, the following information must be maintained:

- Date of withdrawal
- Number of gallons/liters withdrawn
- Fuel type
- Unit number
- Purchase and inventory records showing tax was paid on all bulk withdrawals
- Dispersal logs including all withdrawals from the bulk tank
- Meter readings, inventory measurements, and monthly reconciliations
- Location of bulk tank

**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 MPG to 4.0 mpg or by 20% 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. 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 (7-2019)

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

## III. Vehicle Information

Year	Make	Model	Body Style	
Vehicle Identification Number		Fuel Type <input type="checkbox"/> Electric <input type="checkbox"/> Plug-In Hybrid <input type="checkbox"/> Other <input type="text"/>	Color	
Weight	Previous Weight	Motor Home/Trailer Length	ND License Plate Number	Credit Plate Number
Date 1st used on ND Highways	ATV/UTV Only <input type="checkbox"/> Straddle <input type="checkbox"/> Side by Side	Odometer Reading	Odometer Indicator (Check One) <input type="checkbox"/> Actual Mileage <input type="checkbox"/> Exceeds Mechanical Limits <input type="checkbox"/> 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 <input type="text"/> (\$25.00)	
License Plate Credit Amount	
Plate or Credit Transfer Fee (\$5.00)	
Branch Fee	
Duplicate Plate Fee (\$5.00)	
<b>TOTAL FEES DUE: DO NOT SEND CASH</b>	
Year and Make of Trade-In <input type="text"/>	
VIN of Trade-In <input type="text"/>	
<input type="checkbox"/> Tax Exempt (see instructions on reverse)	

## V. Dealer and Lienholder Information

Date Acquired	Check One <input type="checkbox"/> New Vehicle <input type="checkbox"/> Used Vehicle
Acquired From	ND Dealer No.
First Lienholder	
Mailing Address	
City	State
	ZIP Code
<b>VI. PENALTY:</b> 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.	
<b>NDCC Chapters 39-04 and 39-05.</b> 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.	
<b>NDCC Chapter 57-40.3-08.</b> 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.

**VII. Tax Exemption NDCC 57-40.3**

**(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)

- |  |  |
|--|--|
| <p>1. Gift from: <input type="checkbox"/> Spouse    <input type="checkbox"/> Parent(s)    <input type="checkbox"/> Child    <input type="checkbox"/> Sibling(s)<br/> <input type="checkbox"/> Grandparent(s)    <input type="checkbox"/> Grandchild<br/>                 Gift to (Specify relationship between ALL NEW owners) <input style="width: 100px;" type="text"/></p> <p>2. Joint Tenants with Right of Survivorship and now vehicle is being put in one name only</p> <p>3. Inheritance</p> <p>4. Change of name by: <input type="checkbox"/> Marriage    <input type="checkbox"/> Adoption    <input type="checkbox"/> Court Order</p> <p>5. Vehicle acquired through a lease purchase agreement (Check one)<br/> <input type="checkbox"/> A. If tax was paid on the total lease consideration, tax is due on the lease buyout amount.<br/> <input type="checkbox"/> 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.<br/> <input type="checkbox"/> 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.</p> <p>6. State Fleet</p> <p>7. Lien change --- CURRENT ODOMETER READING <input style="width: 100px;" type="text"/></p> <p>8. Interstate carriers --- Account Number: <input style="width: 150px;" type="text"/></p> <p>9. Tax paid to state that grants reciprocity to North Dakota (Proof required)</p> <p>10. Public Transportation provided under contract with NDDOT</p> <p>11. Dealer resale - USED vehicle</p> <p>12. Dealer resale - NEW vehicle</p> | <p>13. Tribal (SFN 18085 required)</p> <p>14. Disabled American Veteran or Former Prisoner of War - Letter of Eligibility from the Department of Veteran's Affairs is required</p> <p>15. Nonprofit senior citizens' or mobility impaired persons' corporation owned vehicle used for the transportation of the elderly or disabled</p> <p>16. Mobility impaired person(s) purchasing specially equipped vehicle</p> <p>17. Homemade vehicles</p> <p>18. Newly formed <input type="checkbox"/> Partnership    <input type="checkbox"/> Corporation    (Check One)<br/>                 Date formed: <input style="width: 150px;" type="text"/></p> <p>19. Dissolved <input type="checkbox"/> Partnership    <input type="checkbox"/> Corporation    (Check One)<br/>                 Date dissolved: <input style="width: 150px;" type="text"/></p> <p>20. Parochial or private non-profit school buses</p> <p>21. Assembled vehicles by motor vehicle dealer (SFN 21859 required)</p> <p>22. Transfer into family trust</p> <p>23. Military home of record: <input type="checkbox"/> Entry    <input type="checkbox"/> Discharge (SFN 17147 required)</p> <p>24. Mobile Home (SFN 3004 required) or Manufactured Home (SFN 53658 required)</p> <p>25. North Dakota political subdivisions</p> <p>26. Repossession (SFN 2880 required)</p> <p>27. Non-resident military lease</p> <p>28. Total loss settlement or Salvaged</p> <p>29. Other - Specify <input style="width: 150px;" type="text"/></p> |
|--|--|

**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 10 years old 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: \_\_\_\_\_

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

- Collision  Weather  Theft  Interior  
 Water  Vandalism  Fire  Under Carriage  Other

Explanation of Damage: \_\_\_\_\_

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

<b>Section 4</b>			
Name of Transferor (Seller)	Daytime Telephone Number		
Mailing Address	City	State	ZIP Code
Signature of Transferor (Seller)			Date

<b>Section 5</b>			
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.*

<b>DAMAGE DISCLOSURE FORMULA</b>	
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.	
<b>EXAMPLE 1</b>	<b>EXAMPLE 2</b>
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.