



Application to Cancel Registration

Owner Information All owner information must be provided and must match the motor vehicle record

Primary owner's name (last, first, middle initial or business name)		Co-owner's name (if at different street address, check here <input type="checkbox"/> and list on back)	
Street address (primary owner)	City	State	ZIP code
Mailing address, if different from street address (primary owner)	City	State	ZIP code

Vehicle Information All vehicle information must be provided and must match the motor vehicle record

Year	Make	Model	Vehicle/Hull Identification Number (VIN/HIN)
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Facts and Indemnification Agreement

Explain why the vehicle/vessel registration is to be canceled.

Date of sale (if applicable)

Warning - Fraudulent application and falsification of documents are a felony under Utah Law.
 Under penalties of perjury, I declare that this statement is true, correct, and complete. I agree to indemnify the Utah State Tax Commission and all persons acting under direction of the Tax Commission from all liability of litigation, loss, or damage that may arise as a result of the cancellation of the above-described registration.

Owner's signature	Date
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Mail or email this form to:
 MVCC
 Division of Motor Vehicles
 PO Box 30412
 Salt Lake City, UT 84130
 Email: dmv@utah.gov