Conditional Registration Request
Hold at County

Date:

Applicant Information:

Owner 1: _____ ID DL/SS# _____

Owner 2: _____ ID DL/SS# _____

Street Address: _____City: _____ State: _____Zip_____

E-mail: _____ Phone: _____

Vehicle Information:

Vehicle Year: ____ Make: _____ Model_____ Body Style: _____ Color: _____

Vin :

Lienholder Information:

Name (Business): _____

Street Address: _____City: _____ State: ___ Zip_____

Fax Number: _____ Loan or Account Number: _____

Notes:

Date: Initials:

Date: Initials:

Date: Initials:

Date: Initials:

Your Safety • Your Mobility
Your Economic Opportunity

Limited Power of Attorney
For Specific Motor Vehicle/Vessel
Idaho Transportation Department

ITD 3368 (Rev. 08-17)
Supply # 019571504

- See Page 2 for Instructions –

Vehicle or Hull Identification Number (VIN/HIN)		Title Number
Year	Make	Model

Power of Attorney Given To

Name of Business or Individual Representing Vehicle Owner			
Canyon County Assessor			
Address	City	State	Zip
111 N. 11th Ave Suite 250	Caldwell	ID	83605

By my signature below, I hereby appoint the business or individual shown above as my/our attorney-in-fact for the following sole and limited purposes: to endorse, release, or transfer all registration and ownership documents required by Idaho statutes for the above-described/identified vehicle/vessel; and to give full discharge for same, granting to said attorney-in-fact full power of substitution and revocation relating only to the above described/identified vehicle/vessel, hereby ratifying and confirming all that said attorney-in-fact or his substitute shall do or cause to be done by virtue hereof.

Grantor's Signature: If this power of attorney will be used to apply for a duplicate title, it must be notarized.

If grantor is an individual, complete the following

Individual's Full Legal Name (Printed Last, First, Middle)			Individual's Idaho Drivers License No. or SSN
Address of Owner's Current Legal Residence	City	State	Zip+4
Mailing Address (if different)	City	State	Zip+4
Individual's Signature **See *Note for duplicate title application** **X**	Date	Daytime Phone Number	

If grantor is a business, complete the following

Authorizing Business Name	Authorized Representative's Name (Printed)		Business's EIN
Business Current Legal Address	City	State	Zip+4
Mailing Address (if different)	City	State	Zip+4
Authorized Representative's Signature **See*Note for duplicate title application** **X**	Date	Daytime Phone Number	

***Note:** If this form is used to grant power of attorney when applying for a duplicate title, the grantor's signature must be notarized.

Subscribed and sworn before me this

_____ day of _____. year _____

County of _____, State of _____

SEAL

My Commission Expires _____

Notary Public's or
ITD Agent's Signature _____

Your Safety • Your Mobility
Your Economic Opportunity

Indemnifying Affidavit

Idaho Transportation Department
Vehicle Services

ITD 3410 (Rev. 08-17)
Supply # 019580562

Vehicle/Hull Identification Number	Year	Make	Model

Vehicle/Vessel Purchased From

Address

City	State	Zip	Date Purchased

I, the undersigned, acknowledge it is a felony to make a false statement in this affidavit (*Section 49-518, Idaho Code*). I certify that the above-described vehicle/vessel is **free from all liens and encumbrances**, except as set forth in my application for Idaho Certificate of Title. I am entitled to possession and ownership of the vehicle or vessel because:

I am the owner of this vehicle and would like to apply for title and registration in the state of Idaho.

My title is with the lienholder and I do not have possession of it.

If the vehicle described above was imported from another country, I certify that the vehicle is now in Idaho. If the vehicle was commercially imported, I certify that to the best of my knowledge all U.S. DOT Federal Motor Vehicle Safety Standards, EPA, and US Customs and Border Protection requirements have been or will have been satisfied within the required timeframe. If the vehicle was imported for personal use from Canada, I certify that I am aware that I may be assessed a civil penalty up to $5,000 and/or the vehicle may be seized by the US Customs and Border Protection if the vehicle has not met their entry requirements prior to the registration and/or titling of this vehicle. I accept full responsibility for complying with all U.S. DOT Federal Motor Vehicle Safety Standards, EPA, and US Customs and Border Protection requirements.

If the above described property is a vessel, ATV, off-road motorbike, snowmobile, utility type vehicle, slide-in truck camper, or neighborhood electric vehicle (NEV), and no title or Manufacturer's Statement of Origin (MSO) or Manufacturer's Certificate of Origin (MCO) is being submitted, I certify that no MSO or MCO exists and that the vessel or vehicle has never been titled unless otherwise indicated below.

Other Pertinent Facts:

This affidavit is attached to and made a part of my application for Idaho Certificate of Title to the above-described vehicle/vessel. I do hereby agree to warrant and defend said Title, and to not only save harmless and defend, regardless of outcome, the Idaho Transportation Department (ITD) from the expenses of and against all suits, actions, claims, losses, or assertion of claims including costs, expenses and attorney fees to which the department may be subjected on account of any defect in my Title to the vehicle/vessel in question, but also to pay any and all damages suffered by any person or entity resulting from the issuance of this title by the Idaho Department of Transportation.

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct, and that the signature below is my true and legal signature.

Printed Full Legal Name / Business Name	Owner's Idaho Driver's License Number or SSN / Business's EIN

Owner's Physical Address / Business's Physical Address	City	State	Zip

Owner / Business Representative's Signature	Date	Daytime Phone Number
X		( )

Canyon County Assessor Office

Motor Vehicle Department

6107 Graye Ln. Ste. A | Caldwell, ID 83607
Telephone: (208)455-6020 | Fax: (208) 455-6019

Brian R. Stender
Assessor

Greg Himes
Chief Deputy

Lienholder Information:

Date: _____

Name (Business): _____ Fax Number: _____

Account or Loan number: _____

***Loan Origination Date (to be completed by Lien holder)*:** _____

Vehicle Information:

Vehicle Year: _____ Make: _____ Model: _____

Vehicle Identification Number: _____

Applicant Information:

Name: _____ Addtl Name:_____

Street Address: _____

City: _____ State: _____ Zip: _____

Customer Signature:_____ Phone: _____

An application has been made by your client named above to title and register their vehicle in Idaho. The applicant has stated you are holding the title as the lienholder. The State of Idaho requires that the out-of-state certificate of title be surrendered before titling and registration can be completed. If you have an electronic lien, please request a paper title for your state so that we may assist your customer. Please submit the **ACTUAL TITLE** and a **PHOTOCOPY** of this letter to the address show below so that we may notify your client. If your lien is still active it will be recorded on the Idaho title, which will in turn be mailed to you or filed electronically after issuance. Your client will NOT be able to obtain a permanent registration in Idaho until the title you are holding is submitted.

******* ***NOTE***: If the applicant's vehicle is a leased vehicle please provide The Lessor's Idaho Sales Permit #. As of July 1, 2009, all registrations and titles are required to have each owner's Idaho DL#, EIN#, ITIN#, or SS# per SSB 1053aa by the Idaho Legislature.

Sincerely,
Canyon County Motor Vehicle Dept.

Motor Vehicle Department
6107 Graye Ln. Ste. A
Caldwell, ID 83607

SERVING:

Caldwell	Greenleaf	Huston	Melba	Middleton	Nampa	Notus	Parma	Wilder
83605	83626	83630	83641	83644	83651	83656	83660	83676

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Conditional Registration Information

VIN: _____

Yr: _____ Make: _____ Model: _____

IDAHO ADMINISTRATIVE CODE IDAPA 39.02.42 – Temporary Vehicle Registration Idaho Transportation Department When Proof of Ownership Is Insufficient **Section 200 Page 3 c.** Registration of the Vehicle: The vehicle can be **registered for one (1) year. The title block of the registration document will show "Reg Only"** in bold letters. The applicant must obtain adequate proof of ownership prior to the end of the tenth (10th) month of the registration period to allow adequate time for title processing. **The one (1) year "Registration Only" period shall not be extended.** (12-26-90)

I understand:

- **The ownership documents provided are considered to be insufficient by the State of Idaho.**
- **The registration given is considered by the State of Idaho as a Conditional Registration only.**
- **I will not be able to renew my registration at the end of the registration period if my titling requirements have not been met.**
- **If I have provided the DMV with my lienholder information, the DMV will make one attempt to contact the lienholder to request the Certificate of Title on my behalf.**

☐ **If I have a lien holder, it is my responsibility to contact the lien holder to have this request processed.**

☐ **It is my responsibility to ensure my Certificate of Title is submitted to the DMV to be processed.**

☐ **If my title has been lost, stolen or mutilated, it is my responsibility to request a Duplicate Title from my last titling jurisdiction for submission.**

If you have any questions or would like to follow up with us, please give us a call at 208-455-6020.

Printed Name: _____

Signature: _____ **Date:**_____

Conditional Registration Information

VIN: _____

Yr: _____ Make: _____ Model: _____

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