

GOVERNMENT OF THE DISTRICT OF COLUMBIA

DEPARTMENT OF FOR-HIRE VEHICLES
2235 Shannon Place, SE, Washington, DC 20020
(202) 645-6018, FAX (202) 645-3555, http://dfhv.dc.gov

PUBLIC VEHICLE FOR HIRE VEHICLE REGISTRATION ONE STOP FORM

SECTION 1

Type of Application Color Change Replacement Tag Vehicle Change New Registration
 Renewal Registration Duplicate Registration DFHV No. _____

Type of Vehicle Taxicab Limousine
 Vehicle ID (VIN) _____ Year ____ Make ____ Model ____ Tag# _____
 Owners/Co. Full Legal Names _____

I declare and affirm under penalty of perjury that the statements made herein are true and correct to the best of my knowledge, information and belief.

Last four of SSN# _____ DOB _____ Vehicle Mileage _____
 Owner's Signature _____ Date Signed _____
 Address _____
 City _____ State ____ Zip Code ____ Email Address _____
 Primary Phone Number _____ Alternative Phone Number _____

SECTION 2

Association or Company Name _____ PVIN Number _____
 Association or Company Official's Printed Name _____

I declare and affirm under penalty of perjury that the statements made herein are true and correct to the best of my knowledge, information and belief.

Association or Company Official's Signature _____ Date Signed _____
 Insurance Company Name _____ Policy Number _____
 Policy Effective Date _____ Policy Expiration Date _____
 Insurance Company Official's Printed Name _____

I declare and affirm under penalty of perjury that the statements made herein are true and correct to the best of my knowledge, information and belief.

Insurance Company Official's Signature _____ Date Signed _____

SECTION 3

DMV INSPECTION STATION STAMP AND DATE

SECTION 4

DFHV Approval _____ Date _____ Seal _____