



TYPE OR CLEARLY PRINT ALL INFORMATION

Partner Name, Partner Phone, Partner Address, Dealer Name, To: (Required - print name of Private Sector Partner staff member you spoke with.), From: Date:

REQUIRED REQUEST/CORRECTION INFORMATION

Customer Name:

Plate #: VIN:

**The Customer Name, Plate # & VIN MUST be filled in or there could be a delay in processing or paperwork being returned.

THE FOLLOWING REQUEST/CORRECTION IS NEEDED

LIEN REQUEST

RECORD REFINANCE (ADD/REMOVE) REMOVE

LIEN CORRECTION

RECORDED AS CHANGE TO

PLATE CORRECTION

PROCESSED AS CHANGE TO

VIN CORRECTION

PROCESSED AS CHANGE TO

REGISTRATION CORRECTION

PROCESSED AS CHANGE TO

NAME CORRECTION REGISTRANT OWNER BOTH

PROCESSED AS CHANGE TO

MILEAGE CORRECTION

PROCESSED AS CHANGE TO

OTHER

THE ATTACHED DOCUMENTS ARE BEING SUBMITTED (check all that apply):

- MV-900, CORRECT TITLE, CHECK FOR ADDITIONAL FEE, LIEN FEE, CORRECT MSO, OWNER/REGISTRANT ID, MV-901, INSURANCE CARD, OTHER, MV-82, VIN TRACING, MV-50, PROOF OF CORPORATION, POA, LETTER OF EXPLANATION

Mail or email completed form and documents to:

Private Sector Partnering, 6 Empire State Plaza, Room 322, Albany NY 12228 • NYSPartneringPrograms@dmv.ny.gov