



MOTOR VEHICLE REGISTRATION FORM



A- OWNER IDENTIFICATION

TIN	<input type="text"/>	Name	<input type="text"/>		
Identity card Number	<input type="text"/>		Issue Date	<input type="text" value="DD/MM/AAAA"/>	

B- REGISTRATION INFORMATION

Registration Date	<input type="text" value="DD/MM/AAAA"/>	Usage	<input type="text"/>	Amount Paid:	<input type="text" value="RWF"/>
Acquisition Date	<input type="text" value="DD/MM/AAAA"/>	Invoice No	<input type="text"/>	Dealer's TIN	<input type="text"/>
Consumption Date	<input type="text" value="DD/MM/AAAA"/>	No	<input type="text"/>	Clearing Agent TIN	<input type="text"/>
Customs Regime	<input type="checkbox"/> Consumption <input type="checkbox"/> Suspension				

C- VEHICLE INFORMATION

Type	<input type="text"/>	Manufacturer	<input type="text"/>		Model	<input type="text"/>	
Frame No:	<input type="text"/>		Engine No:	<input type="text"/>			
Year	<input type="text" value="AAAA"/>	Volume	<input type="text" value="cc"/>	Weight	<input type="text" value="Kg"/>	Power	<input type="text" value="CV"/>
Steering Wheel :	<input type="checkbox"/> Left <input type="checkbox"/> Right <input type="checkbox"/> N/A			Color	<input type="text"/>		

D- CERTIFICATION

I certify that the information provided above is true and correct in accordance with the Motor Vehicle Law articles discussing the registration of Motor Vehicle and that I'm an authorized representative of the vehicle's owner.

Date	<input type="text" value="DD/MM/AAAA"/>	Title	<input type="text"/>	
Sign in:	<input type="text"/>		Autorised Signature of the owner	

E- FOR RRA USE ONLY

Checked By:	_____		_____		
	Signature		Signature		
Yellow Plate Number	<input type="text"/>	White Plate Number	<input type="text"/>	Status <input type="checkbox"/>	
Yellow Card Number	<input type="text"/>				
Received	<input type="text"/>	Assessment No.	<input type="text"/>	Amount Paid	<input type="text"/>
By	<input type="text"/>		Payment Date	<input type="text"/>	
DOC ID	<input type="text"/>	_____		Receipt No	<input type="text"/>
	Signature				