



State of New Hampshire
DEPARTMENT OF SAFETY
DIVISION OF MOTOR VEHICLES
23 HAZEN DRIVE, CONCORD, NH 03305
Telephone: (603)227-4000 TDD Access Relay NH 7-1-1



Application For Copy of Registration

Owner's Name _____ DOB _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____ E-Mail Address _____

Original Item – Check One: Lost: ☐ Stolen: ☐ Illegible: ☐ Change: ☐

Plate Number or NH Bow Number _____ Type of Plate _____

Decal Number _____ Expiration Date _____

DESCRIPTION OF VEHICLE/BOAT

Year _____ Make _____ Model _____ Color _____

Cylinder _____ Fuel _____ Body Style _____ Gross Weight _____

Vehicle ID# or Hull ID#

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

Owner's Signature _____ Date _____

Signed under penalty of unsworn falsification pursuant to RSA 641:3

DO NOT MAIL CASH – Fee \$15.00