

ME PLATE : \_\_\_\_\_  
 Initials: \_\_\_\_\_  
 Office Use Only

# Registrant Information Form

**Countrywide Trailer Registrations, LLC**

cwtr@Maine.RR.com

Contact Date : \_\_\_\_\_ The Individual DOB: \_\_\_\_\_

Referred by: \_\_\_\_\_ The Business EIN: \_\_\_\_\_

Plate Shipping Address ONLY if  
 different from Legal Address:  
 \_\_\_\_\_  
 \_\_\_\_\_

Business Name: \_\_\_\_\_

Name on Registration: \_\_\_\_\_

Legal Address: \_\_\_\_\_  
 \_\_\_\_\_

Business Ph: \_\_\_\_\_ Cell/Other Ph: \_\_\_\_\_

Email: \_\_\_\_\_ Address/Contact Info Confirmed Updated: \_\_\_\_\_

Date of Registration: \_\_\_\_\_

New Reg: \_\_\_\_\_ Re-Reg: \_\_\_\_\_ Title: \_\_\_\_\_

Transfer: \_\_\_\_\_ State/Plate#: \_\_\_\_\_

- Semi     Car hauler     Flatbed     Truck/Car
- Reefer     Drop Deck     \_\_\_\_\_

Make: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

Style: \_\_\_\_\_ Model: \_\_\_\_\_ GVW: \_\_\_\_\_

Mileage: \_\_\_\_\_ MSRP: \_\_\_\_\_

VIN#: \_\_\_\_\_

Purchase Date: \_\_\_\_\_

Lien Holder: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

- BOS
- POA
- Title/Orig
- Certificate of Origin

---

- Utility
- Boat
- Livestock
- Camper
- Auto
- P/U Truck

<b>Registration Expiration Date:</b>	2/28/_____
# _____ Years Reg Cost:	
Title Cost:	
Transfer Fee:	
Excise Tax:	
5.5% Maine State Sales Tax:	
<b>Rush-In House Overnight</b> Allow 2-3 business days	
<b>Standard Processing:</b> Allow 10-14 bus days	
<b>Sub-Total</b>	
Process Fee:	
<b>Total Client Cost:</b>	
Payment Type:	
Date/Invoice #	
Sent Receipt:	

DATE SHIPPED: \_\_\_\_\_

TRACKING #: \_\_\_\_\_

Group/File#: \_\_\_\_\_

State Code: \_\_\_\_\_