

**APPLICATION AND NOTICE OF INTEREST FOR THE
CALIFORNIA DEPARTMENT OF MOTOR VEHICLE'S
ELECTRONIC LIEN AND TITLE PROGRAM**

(Please Type)

Fax application & attachments to: ELT Administrator @ (916) 657-2031

TYPE OF FINANCIAL INSTITUTION (PLEASE CHECK ONE)			
California Bank or Credit Union	<input type="checkbox"/>	California Savings & Loans	<input type="checkbox"/>
California Thrift & Loan	<input type="checkbox"/>	California Finance Company	<input type="checkbox"/>
Federal Credit Union	<input type="checkbox"/>	Federal Savings & Loans	<input type="checkbox"/>
National Bank	<input type="checkbox"/>	Out of state Bank or Credit Union	<input type="checkbox"/>
Out of state Savings & Loans	<input type="checkbox"/>	Out of state Finance Company	<input type="checkbox"/>
Out of state Thrift & Loan	<input type="checkbox"/>	Other (_____)	<input type="checkbox"/>

Note: Please Include A Copy Of Your Federal/State Charter/License With This Application.

COMPANY NAME:

MOST COMMON WAY COMPANY NAME DISPLAYED ON TITLES:
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PHYSICAL ADDRESS (IF MULTIPLE LOCATIONS USE HOME OFFICE)			
Address:			
City:	State:	Zip:	

MAILING ADDRESS (ADDRESS USED FOR YOUR TITLES)			
Address:			
City:	State:	Zip:	

ADMINISTRATIVE CONTACT			
NAME:			
EMAIL ADDRESS:			
TELEPHONE NUMBER:			
FAX NUMBER:			

DATA PROCESSING CONTACT (IF YOU ARE DEVELOPING IN-HOUSE SOFTWARE)			
NAME:			
EMAIL ADDRESS:			
TELEPHONE NUMBER:			

COMPANY DMV DESK CONTACT			
NAME:			
EMAIL ADDRESS:			
TELEPHONE NUMBER:			

PERSON WHO WILL SIGN THE DMV CONTRACT			
NAME:			
EMAIL ADDRESS:			
TELEPHONE NUMBER:			

TYPE OF ELT SOFTWARE TO BE USED	
PURCHASED/LEASED FROM VENDOR	NAME:
WILL USE A SERVICE BUREAU	NAME:
IN-HOUSE DEVELOPMENT	

APPROXIMATE NUMBER OF PAPER TITLES ON HAND:	
APPROXIMATE NUMBER OF TITLES PROCESSED WEEKLY:	

DO YOU FINANCE LEASED VEHICLES? (CHECK BOX THAT APPLIES)	
YES <input type="checkbox"/>	NO <input type="checkbox"/>
Do you resell leased vehicles at the end of the lease to anyone except the lessee? DMV requires you to have a Lessor/Retailer license as required in CVC Section 11600. If you have a DMV Lessor/Retailer License please enter license # _____ .	

DO YOU ALSO WISH TO CONVERT YOUR EXISTING PAPER TITLES TO ELECTRONIC RECORDS? A FEE WILL BE ASSESSED BY DMV FOR THIS PROCESS. {\$0.20 PER ITEM}.

WILL NOT CONVERT TITLES	<input type="checkbox"/>
WILL CONVERT TITLES	<input type="checkbox"/>
WILL NOT AT THIS TIME	<input type="checkbox"/>

IF CONVERTING, PLEASE COMPLETE THE FOLLOWING:

- PROJECTED NUMBER OF PAPER TITLES TO CONVERT: _____
- WHO WILL CREATE THE CONVERSION C TAPE?
 CREATE IN-HOUSE _____
 USE A DATA PROCESSING SERVICE OR SERVICE BUREAU _____

DO YOU HAVE OTHER ELT ID NUMBERS AT THIS TIME? _____

IF YES, WHAT ARE THE ELT ID NUMBERS? _____

DO YOU WISH TO COMBINE THESE ENTITIES IN TO A SINGLE CONTRACT? _____

INFORMATION PROVIDED BY	
NAME:	
TELEPHONE #:	
DATE:	
EMAIL ADDRESS:	
SIGNATURE:	

* All information provided will remain confidential.