# Vermont Department of Motor Vehicles Dealer's Vehicle Record

Sheet #: _____ Year: _____ Dealer Name: _____

Dealer Reg#: _____

_____
Signature of Dealer or Agent

| Make | Vehicle Identification Number | Type | Year (yyyy) | N or U | Name & Address of Person Vehicle Acquired From | Date Acquired | Vehicle Sold/Disposed To (Name & Address) | Date Sold | Temp or In-transit Plate # |
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