**APPLICATION FOR MANUFACTURER BUYBACK BRANDED TITLE FOR A VEHICLE**

Wisconsin Department of Transportation [wisconsindmv.gov](http://www.wisconsindmv.gov/)

MV2850 10/2019 s.218.0171, s.340.01(28e) Wis. Stats. & Trans Rule 143

**Definition of “Manufacturer buyback vehicle”:** means a motor vehicle repurchased by its manufacturer, or by an authorized distributor or dealer with compensation from the manufacturer, because of a nonconformity that was not corrected after a reasonable attempt to repair the nonconformity under s.218.0171 or under a similar law of another state.

**This form cannot be used if a lien is to be listed.**

Complete all sections below and remit with the current title for the vehicle along with the proper fee for title.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section A – MANUFACTURER/AUTHORIZED DISTRIBUTOR/DEALER** | | | | |
| Owner Legal Name – Last, First, Middle Initial OR Business Name | | FEIN – Required   |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  | – |  |  |  |  |  |  |  | | 1 | 2 |  | 3 | 4 | 5 | 6 | 7 | 8 | 9 | | | |
| Street Address (include P.O. Box if applicable) | City | | State | ZIP Code |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section B – VEHICLE INFORMATION** | | | | |
| Vehicle Identification Number   |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  | | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | | Year | Make | Model | Type |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section C – SPECIAL MAILING ADDRESS (if applicable) – LEAVE BLANK IF SAME AS ABOVE** | | | | |
| Recipient Name – Last, First, Middle Initial OR Business Name | | Priority Mailer Attached  Yes  No | | |
| Street Address (include P.O. Box if applicable) | City | | State | ZIP Code |

|  |  |  |
| --- | --- | --- |
| **Section D – FEES** | | **MAIL APPLICATION, CURRENT TITLE & FEE TO:** |
| Title transfer fee……………………………………...$ 164.50 |  | **RESEARCH & INFORMATION UNIT Wisconsin Department of Transportation P.O. Box 8070 Madison, WI 53708-8070** |
| **Make check payable to: REGISTRATION FEE TRUST** | |

|  |  |  |
| --- | --- | --- |
| **Section E – SIGNATURE of Representative for MANUFACTURER/AUTHORIZED DISTRIBUTOR/DEALER** | | |
|  |  | **X** |
| (Name and Title of Representative – PLEASE PRINT) |  | (Representative Signature) (Date) |

**NOTE: This form can only be used by a manufacturer, authorized distributor or Wisconsin dealer.**