



# THIRD PARTY REQUEST FOR TITLE OR REGISTRATION CORRECTION

Wisconsin Department of Transportation  
MV1047 8/2025 S. 341.21 Wis. Stats.



<b>Vehicle Identification Number (VIN)</b> <i>(standard VIN has 17 characters)</i>																	<b>License Plate Number</b>								<b>Title Number</b>												
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	1	2	3	4	5	6	7	8	1	2	3	4	5	6	7	8	9	10	11	12	13
<b>Vehicle Model Year</b>					<b>Vehicle Make</b>					<b>Agent's Email Address REQUIRED</b>																											
<b>Agent Legal Business Name</b>										<b>Dealer Number</b>					<b>Terminal ID</b>					<b>Contact Person</b>					<b>(Area Code) – Telephone Number</b>												

Describe in detail the change you are requesting:

- And/Or Conjunction (Send current title and all customer signatures)
- Owner (Changes of ownership may require a completed MV1 or MV11, the original title, and titling fees)
- Lien (Send current title, lien release, loan filing fee, and provide lien holder name and address)
- Color
- VKI (Vehicle Kept In)
- Plates/Registration ( I certify that the plates were received and destroyed by the dealer )
- Odometer (Corrections for this form must be submitted along with the secured MV11 or MV2488 forms)
- VIN (Vehicle Identification Number)
- Other (provide description below)

Description of error: (attach additional documents if needed)

**Contact the Agent Partnership Unit with questions.**

*I agree to protect and indemnify the Wisconsin Department of Transportation in any claims arising out of the issuance of a changed title or registration on the above-described vehicle. I also certify with my signature that to the best of my knowledge the information and statements on this request for changes are true and correct.*

**X**

(Signature)

(Date – mm/dd/yyyy)

Send completed form to:  
Wisconsin Department of Transportation  
Agent Partnership Unit  
PO Box 7909  
Madison, WI 53707-7909