

Low-Power Scooter Registration Application

Department Use Only
Decal #

THIS FORM IS TO BE USED BY INDIVIDUAL OWNER APPLYING DIRECTLY TO THE STATE REGISTRATION SECTION FOR LOW-POWER SCOOTER REGISTRATION

Low-Power Scooter Information					
Vehicle Identification Number (VIN)				Purchase Date	Color
Year	Make	Model	Fuel Type	<input type="checkbox"/> CC's <input type="checkbox"/> Wattage	CC's or Wattage

Affidavit of Low-Power Scooter Compliance

The following affidavit must be completed to register a Low-Power Scooter. The Low-Power Scooter listed above meets the following criteria:

- A self-propelled vehicle designed primarily for use on roadways with not more than three wheels in contact with the ground.
- Has no manual clutch.
- Has either of the following (check one):
 - A cylinder capacity not exceeding fifty cubic centimeters (50 cc's) if powered by internal combustion;
 - or
 - A wattage not exceeding four thousand four hundred seventy-six (4,476) if powered by electricity.
- I swear or affirm in accordance with section 24-12-102, C.R.S., under penalty of perjury that I now have in effect a complying policy of motor vehicle insurance including an operator's policy pursuant to part 6 of article 4 of title 10, C.R.S., or a certificate of self-insurance to cover the vehicle or operator of the vehicle for which this registration is issued, and I understand that such insurance must be renewed so that coverage is continuous. Noncompliance is a misdemeanor traffic offense, that the minimum penalty for such offense is a five-hundred-dollar fine, and that the maximum penalty for such offense is one year's imprisonment and a one-thousand-dollar fine. Owner's shall be required as a condition of obtaining a registration card to sign an affirmation clause that appears on the registration.

Signature of Owner (required)	Date
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Printed Name of Owner

Owner/Applicant Information

Owner/Applicant Name	Daytime Phone Number ()
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Additional Owner/Applicant Name(s)

Legal Address (PO Boxes are not permitted)

City	State	ZIP
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Mailing Address (If different from Legal Address)

City	State	ZIP
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Printed Name as it appears on Identification

<input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other _____	ID#	Expires	DOB
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The undersigned witness affirms that the named owner of the vehicle identified in this document presented the identification described above.

Witness Signature	Witness Printed Name	Date
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Low-Power Scooter owner should complete this form in its entirety. Incomplete forms may be rejected.

1. Submit photocopies of your ownership document(s) (i.e., bill of sale, invoice etc. . .) along with this form. The ownership document must list you as the owner and the name must match your Secure and Verifiable Identification. If your name is different, please complete the DR 2421 Statement of One in the Same and provide with this form as well as providing proof of insurance for this Low-Power Scooter. Do not send originals. Photocopy will not be returned.
3. Enclose a check for the Total Amount Due.
4. Mail this form, photocopy of ownership document, photocopy of proof of insurance and check to the address listed below.

MAIL TO:
 Colorado Department of Revenue
 Division of Motor Vehicles
 PO Box 173350
 Denver, CO 80217-3350

WALK-IN:
 Colorado Department of Revenue
 Division of Motor Vehicles,
 Vehicle Services Unit
 1881 Pierce Street
 Lakewood, CO 80214

NO REFUNDS WILL BE GRANTED	LIABILITY CODE 5750
MAKE CHECKS PAYABLE TO: Colorado Department of Revenue	

The State may convert your check to a one time electronic banking transaction. Your bank account may be debited as early as the same day received by the State. If converted, your check will not be returned. If your check is rejected due to insufficient or uncollected funds, the Department of Revenue may collect the payment amount directly from your bank account electronically.	TOTAL AMOUNT DUE \$5.85
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