DMV-LSV1-TR Rev. 11/2021

West Virginia Department of Transportation

Division of Motor Vehicles

Low Speed Vehicle Certification

dmv.wv.gov
1-800-642-9066

THIS FORM MUST BE COMPLETED AND SUBMITTED WITH THE REGISTRATION RENEWAL APPLICATION

A) Applicant's Information

Name: _____
LAST FIRST MIDDLE

Address: _____
STREET ADDRESS CITY COUNTY STATE ZIP

B) Vehicle Information

Make _____ Year ☐☐☐☐ Title No. ☐☐☐☐☐☐☐☐☐☐☐☐

VIN No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐ Current Plate No. ☐☐☐☐☐☐☐☐

C) Applicant Certification

I/we certify under penalty of false swearing that all lights, brakes, tires, and belts on the vehicle named herein are in good working condition.

(X) _____ ___/___/___
SIGNATURE OF OWNER(S) DATE