

STATEMENT OF CONSTRUCTION

Sections 1 through 5 and 8 must be completed for assembled trailers weighing less than 6,000 pounds. Complete both sides of form for all other vehicle types.

SECTION 1:	VEHICLE DESCRIPTION	l				
IDENTIFICATION NUM	IBER	ENGINE YEAR MODEL		MC	TORCYCLE ENGINE NU	MBER
SECTION 2:	CONSTRUCTION OF VE	HICLE				
This vehicle/tr by me for me by:	ailer was primarily assemb	led:				
•	OMPANY OR AGENT OF COMPANY					
RESIDENCE OR BUSI	NESS ADDRESS					
CITY			STATE	ZIP CODI	TELEPH	ONE NUMBER
SECTION 3:	COMPONENT PART(S)	INFORMATION				
Accompanying (<i>Check applic</i>	g the application are bills o	f sale for the following	major compo	onent pai	ts:	
Engine	☐ Transmission	☐ Frame ☐ E	Body			
SECTION 4:	STATEMENT OF FACTS	}				
SECTION 5:	COST INFORMATION A	ND VEHICLE VALUE				
Purchase price	e of the unassembled kit .				\$	
Purchase price	e of the partially assemble	d vehicle (body/frame))		\$	
Purchase price of the completely assembled vehicle					\$	
Purchase price	e of the new and/or used c	omponent parts			\$	
Cost of the fra	me (if purchased separate	ly)			\$	
Cost of the en	gine (if applicable)				\$	
Cost of the ins	stallation of the transmissio	n/engine (if applicable	e)		\$	
Value of parts	not supported by bills of s	ale or invoices			\$	
Total value of	f the vehicle (including la	abor)			\$	

DENTIFICATION NUMBER ENGINE YEAR MODEL	•	MOTORCTOLE EN	MOTORCYCLE ENGINE NOMBER			
ECTION 6: PURCHASE AND INSTALLATION OF M	IAJOR COMPONENT	PARTS				
ourchased and/or acquired the engine from:						
AME OF PERSON, COMPANY, OR AGENT OF COMPANY						
SIDENCE OR BUSINESS ADDRESS						
TY	STATE	ZIP CODE	TELEPHONE	NUMBER		
purchased and/or acquired the transmission from:						
ME OF PERSON, COMPANY, OR AGENT OF COMPANY						
SIDENCE OR BUSINESS ADDRESS						
TY	STATE	ZIP CODE	TELEPHONE	NUMBER		
purchased and/or acquired the frame from: ME OF PERSON, COMPANY, OR AGENT OF COMPANY						
SIDENCE OR BUSINESS ADDRESS						
TY	STATE	ZIP CODE	TELEPHONE	NUMBER		
purchased and/or acquired the body from:	l .		l			
ME OF PERSON, COMPANY, OR AGENT OF COMPANY						
ESIDENCE OR BUSINESS ADDRESS						
TY	STATE	ZIP CODE	TELEPHONE	NUMBER		
ECTION 7: DELIVERY OF COMPLETE VEHICLE						
took possession of the completely assembled vehi	cle on:					
ALE (MMDDYYYY)						
took possession from:						
AME OF PERSONS, COMPANY OR AGENT OF COMPANY						
took possession at the following address:						
SIDENCE OR BUSINESS ADDRESS	CITY			STATE		
ESIDENCE OR BUSINESS ADDRESS	CITY			STATE		
				STATE		
ECTION 8: OWNER'S SIGNATURE AND CERTIFIC	ATION					
ECTION 8: OWNER'S SIGNATURE AND CERTIFIC the best of my knowledge, I certify that all of the ed	ATION quipment used to ass			ormance v		
ECTION 8: OWNER'S SIGNATURE AND CERTIFIC the best of my knowledge, I certify that all of the eding applicable federal motor vehicle safety standards.	ATION quipment used to ass I also further agree to	indemnify and	save harmles	formance v		
ECTION 8: OWNER'S SIGNATURE AND CERTIFIC of the best of my knowledge, I certify that all of the ediny applicable federal motor vehicle safety standards. If Motor Vehicles of the State of California for any long above described vehicle in California or from the	CATION quipment used to ass I also further agree to oss suffered resulting e issuance of a Califo	indemnify and g from the regi rnia certificate	save harmles stration/or ide of ownership	formance ves the Directification occurring		
ECTION 8: OWNER'S SIGNATURE AND CERTIFIC to the best of my knowledge, I certify that all of the ediny applicable federal motor vehicle safety standards. If Motor Vehicles of the State of California for any lone above described vehicle in California or from the ame. I certify (or declare) under penalty of perjury	CATION quipment used to ass I also further agree to oss suffered resulting e issuance of a Califo	indemnify and g from the regi rnia certificate	save harmles stration/or ide of ownership	formance ves the Direction of the Covering		
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