



APPLICATION FOR CERTIFICATE OF TITLE & REGISTRATION OF A VEHICLE

Three Affiliated Tribes DOT
Licensing Administration
PO Box 609
335 Main Street
New Town, ND 58763
(701) 627-4513
Website: www.mhadot.com

Part I - This application is for:

- ☐ Vehicle Registration/Temporary Registration
☐ Registration or Title Change
☐ Trailer/Vehicle Registration Duplicate

**REGISTRATION IS OPEN TAT ENROLLED MEMBERS WHO LIVE ON THE
FORT BERTHOLD INDIAN RESERVATION**

*MHA Licensing does not register vehicles/trailers over 55,000 lbs. or any water craft
in accordance with the Compact signed between the State of ND and the Three
Affiliated Tribes. (No Semi or Semi-Trailers)*

Part II - Applicant Information:

Applicant's Legal Name (Print Only)		TAT Enrollment Number 301U-		Telephone Number	
Mailing Address	City	State	Zip	County	
Co-Applicants Legal Name (Print Only)		Tribal or State ID#		Telephone Number	
Mailing Address <input type="checkbox"/> Same as Applicant	City	State	Zip	County	
Does this vehicle have a lienholder? <input type="checkbox"/> No <input type="checkbox"/> Yes: Proceed to Part IV		Is this a new vehicle from a dealership? <input type="checkbox"/> No <input type="checkbox"/> Yes: Proceed to Part V			

Part III - Vehicle Information

Year	Make	Model	Body Style
Vehicle Identification Number	Color	Weight	Length <input type="checkbox"/> Motor Home <input type="checkbox"/> Trailer
Odometer Reading <input type="checkbox"/> Not Required <input type="checkbox"/> Estimated	ND Title Number (if applicable)		

Part IV - Dealer and Lienholder Information

First Lienholder (MHA title will be mailed to the first lienholder)	Mailing Address	City	State	Zip
Second Lienholder	Mailing Address	City	State	Zip

Part V - Dealership Purchase - Temporary Registration

Please submit the dealership's Bill of Sale, Odometer Reading & Trade-In documents (if applicable)

Date Acquired <input type="checkbox"/> New Vehicle <input type="checkbox"/> Used Vehicle	Dealership Name:		
OFFICE USE ONLY: TEMP REG #:	DATE RECEIVED	EXPIRATION DATE	MHA DOT EMPLOYEE INITIALS:

I, the undersigned, under the penalties of perjury, do solemnly swear (or affirm) that I am the owner or legal agent of the owner of the above-described vehicle and that the statements contained herein are true.

Also, I, the undersigned do hereby submit to the jurisdiction of the Mandan, Hidatsa, & Arikara Nation and its courts for purposes of enforcement as amended of RESOLUTION 11-080-VJB, including without limitations the assessment and collection of any penalties, fines, and interests provided by "Mandan, Hidatsa & Arikara Nation Motor Vehicle Manual. I understand I must abide by all public safety traffic laws while within the Fort Berthold Indian Reservation."

Applicants Signature	Date
Co-Applicants Signature	Date

BLACKOUT PLATE: NHS ____

MHA PLATE: ____ **MHA**

SLP: BLACKOUT: ____

MHA: ____