Quote Request

From: _____
Phone: _____
Fax: _____
Email: _____

WA TABS & TITLES
HELPING YOU HIT THE ROAD

Customer name: _____

Physical address: _____

Sale (circle one): Private Party Dealer

Vehicle type (circle one): Passenger Truck Trailer Camper
ORV WATV Travel Trailer Motorhome
Motorcycle Snowmobile Vessel

Customer Provided Plate? Y N
(must be same use class)

Vehicle make: _____

Vehicle model: _____

Vehicle year: _____

Mileage: _____

VIN: _____

Scale weight: _____

Previous state: _____

*Purchase price: _____
*(List separate prices for vessel and trailer. Also, vessel to include value of motor and accessories.)

Trade-in allowance: _____

Taxes paid: _____

Additional information:
_____

_____

Submit requests to either:

Castle Rock Auto Licensing
2 Cowlitz St W, PO Box 1770
Castle Rock WA 98611
P: 360-274-2222 F: 360-274-9999
Email: crautolicensing@gmail.com

- OR -

Shelton Tabs & Titles
2505 N Olympic Hwy Suite 130
Shelton WA 98584
P: 360-462-0808 F: 360-462-0808
Email: watabsandtitles@gmail.com