



State of South Dakota
 Motor Vehicle Division
 445 E. Capitol Avenue
 Pierre, SD 57501
 605-773-3541 <http://dor.sd.gov>

Out-of-State Dealer Tax Assessment

A

This form is to be filled out by the dealer who sells the motor vehicle. Please submit the completed form with the title transfer paperwork to the county treasurer's office.

Instructions

B

Name of Dealership: _____ Agent for Dealership: _____

Street Address: _____ City _____ State _____ Zip _____

Phone Number: _____ Email Address: _____

Dealership
Information**C**

Year: _____ Make: _____ Model: _____

VIN/HIN: _____ Title Number: _____

Vehicle
Information**D**

Date of Sale: _____ Selling Price: _____ Tax Amount: _____

State Tax was Paid to: _____ Tax Type (Sales, Excise, Etc.) _____

Tax
Information**E**

Purchaser's Name: _____ Address: _____

City: _____ State: _____ Zip Code: _____

Purchaser
Information**F**

This statement is made with the knowledge that it is a Class 5 felony to make a false statement and that in doing so, I am subject to the penalty of South Dakota law.

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct.

Signed on the ____ day _____, _____ at _____.

Printed Name of Dealership Representative: _____.

Dealership Representative's Signature: _____.

Unsworn
Declaration