MARYLAND DEPARTMENT OF TRANSPORTATION
MOTOR VEHICLE ADMINISTRATION

CS-063 (09-24)

Application for 60 Day Temporary Registration Permits

Permit Control Numbers - Starting _____ Ending _____

The undersigned, an authorized representative of the dealer named herein, makes application for 50 sets of 60-day temporary registration permits.

Dealer Type: ☐ New Car ☐ Used Car ☐ Motorcycle ☐ Trailer

Name of Dealer: _____

Dealer's Registration Number: _____

Address of Dealer: _____

Signature of Dealer: _____ Date: _____

For MVA use only

Issuance and approved by: _____ Date Issued _____

Type of Identification provided _____

For more information, please call: **410-768-7000** (to speak with a customer service representative).
TTY for the hearing impaired: **1-800-492-4575**. Visit our website at: **www.MVA.Maryland.gov**