

Mail Drop 542M Aircraft Registration Unit PO Box 2100 Phoenix AZ 85001-2100 acreg@azdot.gov

## APPLICATION FOR AIRCRAFT REGISTRATION

Application Type: New to Arizona New Owner Updates Close Account/Cancel Registration (See section below)									
FAA Aircraft No. <b>N</b>	Serial Number		Ma	nufacture Year		Manufacturer		Model	
Aircraft Type (check only one) Antique Agricultural Classic Experimental Glider Homebuilt Rotocraft Warbird Landplane									
Company Name/Owner									
Owner Type (check only one)       Individual       Corporation       Dealership       Partnership       Co-Ownership       Lessee (Provide Lessors Name)         (Provide list of all Partners and/or all Co-Owners)									
Residential Address					City		State	Zip Code	
Primary Email					Primary Phone Number ( )				
Mailing Address					City		State	Zip Code	
Date Aircraft Entered Arizona Aircraft Based at: (use Arizona airport cod					s)				
Date Aircraft Departed Arizona (Closed/Cancelled) Aircraft Based out (use airport codes)				craft Based out of sta e airport codes)	state at:				
Claiming registration exemption?			No	If yes, please complete Aircraft Exemption Affidavit					
Claiming any of the following status for the aircraft? (maintenance, manufacture, salvage, storage)									
Is this a recent purchas	se?	Yes	No	D Private Purcha	ise 🗌	Dealer Purchase	Date of Purch	nase:	
Were Sales Tax Paid?		Yes No If yes, proof of sales tax paid is required							
Did you sell or trade an purchase of this aircrain provide the following)		Yes	No	FAA Aircraft No. <b>N</b>	Pı	urchaser Name			
Date of Sale or Trade		Address							

The Organization Administrator is responsible for adding, editing, and deactivating any other organization Representatives and for resetting passwords for Representatives in your account. All company Representatives on the account will also be able to handle monetary transactions placed on the account, including disbursement requests.

Organization Administrator Name (Printed First and Last Name	Driver License Number	State	
Primary Phone Number	Email Address		
( )			

I hereby certify that I am the owner or principal of the above-named organization, or I am otherwise legally authorized to act on its behalf and the information contained on this application is true, accurate, and complete to the best of my knowledge. I further certify that the Organization Administrator designated herein is authorized to perform the functions mentioned above. I relieve the State of Arizona, the Arizona Department of Transportation, their employees, agents, and representatives of any liability related, directly or indirectly, to the release of the organization's information to the above-named and authorized Organization Administrator. I understand that this authorization does not absolve me of the responsibility to ensure that each employee maintain the security and confidentiality of their password, account, and all activities occurring therein.

(If partnership; must be signed by all partners. If corporation; must be signed by one corporate officer.)

Owner Signature