ATTN: OHV SECTION
555 Wright Way
Carson City, NV 89711
(775) 684-4381
www.ohv.nv.gov

LARGE ALL-TERRAIN VEHICLE INSURANCE DECLARATION
NRS Chapters 482, 485 and 490

I hereby apply for registration for the large all-terrain vehicle described below and I declare that, while this vehicle is registered in my name, I will continuously provide in my name, security as required by NRS 485.185, by a motor vehicle liability insurance policy. **NOTE: THE VEHICLE MUST BE INSURED BY AN INSURANCE COMPANY LICENSED IN THE STATE OF NEVADA.** Out-of-State insurance will not be accepted.

Operation of the vehicle without having evidence of insurance of the vehicle in the possession of the operator of the vehicle; or failure or refusal to surrender, upon demand, to a peace officer or to an authorized representative of the Department the evidence of insurance, is a misdemeanor and shall be punished by a fine not to exceed $100.

By signing this declaration you attest that the vehicle listed below meets the definition of a Large All-Terrain vehicle. (NRS 490 "Large all-terrain vehicle" means any all-terrain vehicle that includes seating capacity for at least two people abreast and: 1) Total seating capacity for at least four people; or 2) A truck bed.)

NOTE: It is a **gross misdemeanor** to use a false or fictitious name or address in this application for registration, or to knowingly make a false statement or knowingly conceal a material fact or otherwise commit a fraud in this application. All fields must be completed.

PLEASE PRINT OR TYPE

Vehicle Identification Number

Year _____ Make _____ Model _____

Name of Insurer _____

Mailing Address: _____
Address City State Zip Code

Policy Number _____

Effective Date _____ Expiration Date _____

Full Legal Name _____

Nevada Driver's License, Identification Card Number, Date of Birth, FEIN for businesses, or Motor Carrier Number

_____

Physical NV Address: _____
Address City State Zip Code

Mailing Address: _____
Address City State Zip Code

Telephone _____ E-mail Address _____

SIGNATURE_____DATE_____

Registered Owner