

STATEMENT OF MULTIPLE COUNTY USE OF VEHICLE (CVC §4004.5)

MAIL TO DEPARTMENT OF MOTOR VEHICLES P.O. BOX 942869 SACRAMENTO, CA 94269-0001

YOU MAY PROVIDE THE FOLLOWING INFORMATION IF YOU RESIDE IN MORE THAN ONE COUNTY FOR A PERIOD OF MORE THAN 30 DAYS, OR USE YOUR VEHICLE IN A COUNTY OTHER THAN YOUR COUNTY OF LEGAL RESIDENCE FOR BUSINESS PURPOSES. ADDITIONAL PAGES MAY BE ATTACHED IF THE INFORMATION TO BE SUBMITTED EXCEEDS THE SPACE PROVIDED.

SECTION 1 — VEHICLE INFORMATION				
VEHICLE IDENTIFICATION NUMBER (VIN)	YEAR MODEL	MAKE OF VEHICLE	VEHICLE	LICENSE NUMBER
SECTION 2 — RESIDENCY / M	ULTIPLE COUNTY	USE OF VEHICLE INFOR	MATION	
I reside at the following address/a	ddresses more than 3	30 days during the year.		
STREET ADDRESS	COUNTY	CITY		STATE ZIP CODE
STREET ADDRESS	COUNTY	CITY		STATE ZIP CODE
STREET ADDRESS	COUNTY	CITY		STATE ZIP CODE
I use the vehicle for business purp	poses in the following	counties during the year.	STATE	NUMBER OF DAYS
COUNTY			STATE	NUMBER OF DAYS
COUNTY			STATE	NUMBER OF DAYS
SECTION 3 — COUNTY WHER	RE VEHICLE IS LOC	ATED OR USED MOST O	F THE TIME	
	RE VEHICLE IS LOC	ATED OR USED MOST O	F THE TIME	
COUNTY		ATED OR USED MOST O	F THE TIME	
SECTION 4 — CERTIFICATION	N	ATED OR USED MOST O		PAYTIME TELEPHONE NUMBE
SECTION 3 — COUNTY WHER COUNTY SECTION 4 — CERTIFICATION PRINT TRUE FULL NAME MAILING ADDRESS	V			PAYTIME TELEPHONE NUMBE) STATE ZIP CODE

Submitting a REG 6004 will not change the registered owner's address in the department records. To notify the department of a change of address, vehicle owners may submit a Notice of Change of Address form (DMV 14) to the department's address shown on the form, or go online at https://www.dmv.ca.gov/portal/dmv/detail/online/coa/welcome.