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[Your Name]
[Your Address]
[City, Postcode]
[Email Address]
[Phone Number]
[Date]
Driver and Vehicle Licensing Agency
Swansea
SA99 1BA
Dear Sir/Madam,
Subject: Vehicle Registration Application for [Vehicle Make and Model] -
[Registration Number if applicable]
I am writing to request the registration of my vehicle with the details
below:
- Vehicle Make: [Make]
- Vehicle Model: [Model]
- Vehicle Year: [Year]
- VIN (Vehicle Identification Number): [VIN]
- Engine Number: [Engine Number]
- Colour: [Colour]
- Previous Registration (if applicable): [Previous Registration]
Please find enclosed the necessary documents to support my application,
including:
1. Proof of identity (e.g., copy of driving license or passport)
2. Proof of address (e.g., utility bill or bank statement)
3. Purchase invoice (if applicable)
4. Any other relevant documents
I would appreciate your prompt attention to this matter, and I look
forward to receiving my vehicle registration details soon.
Thank you for your assistance.
Yours faithfully,
[Your Signature (if sending a hard copy)]
[Your Printed Name]
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