

OHIO DEPARTMENT OF PUBLIC SAFETY **BUREAU OF MOTOR VEHICLES**

APPLICATION(S) FOR CERTIFICATE OF TITLE TO A MOTOR VEHICLE

(Type or Print in Ink)

CHECK TYPE OF APPLICATION(S) Fee of \$5.00 for failure to apply for title within 30 days of assignment.

APPLICANT'S PRINTED NAME							SSN /	SSN / EIN		
APPLICANT'S	S PRINTED ADDRE	ESS		CITY		STAT	E ZIP CO	DDE	COUNTY	
CO- APPLICA	ANT'S NAME		1			SSN /	EIN			
Hereby declares under penalty of perjury that he / she is the lawful (owner / purchaser / lien holder) of the following described motor vehicle and hereby makes application for the following:										
ORIGINAL CERTIFICATE OF TITLE Evidence of ownership										
MCO, Previous Title No., Registration, etc.										
Applicant acquired said motor vehicle by (state how acquired)										
from: Name of Previous Owner Is Seller a Minor? Yes No										
Address of Previous Owner										
The following is a full statement of all liens on said motor vehicle. If no lien state "none", if more than one lien, attach statement of all additional liens. Lien Holder /E Code # Address										
☐ DUPLICATE CERTIFICATE OF TITLE										
Applicant states that Certificate of Title Number has been ;										
that said motor vehicle has not been sold or disposed of except as stated below:										
The vehicle is in the possession of										
residing at and that if said Certificate of Title be hereby										
recovered by this applicant he will deliver same to the Clerk of Courts for cancellation.										
The following is a full statement of all liens on said motor vehicle. If no lien state "none", if more than one lien, attach statement of all additional liens.										
Lien Holder /E Code # Address										
REPLACEMENT CERTIFICATE OF TITLE for Certificate of Title Number										
MEMORANDUM CERTIFICATE OF TITLE for Certificate of Title Number										
SALVAGE CERTIFICATE OF TITLE										
Applicant states that the original Certificate of Title Number has been surrendered to the Clerk of Courts.										
			MODEL		BODY TYPE			CONVERSION		
PURCHASE I	PRICE	TRADE IN ALLOWA \$	ANCE	GROSS TAX [DUE	VENDOR'S [DISCOUNT	TAX PAID \$		
TAX EXEMPTION				DEALER'S PERMIT NUMBER				VENDOR'S	NUMBER	
☐ Yes REASON:										
Condition of vehicle (check only one) Good Fair Poor Wrecked Print Title Yes No With Right of Survivorship Yes No Transfer on Death Yes No If yes, BMV 3811 Form required										
Applicant is a minor										
Is this an Adaptive Mobility Vehicle defined as being designed, modified, or equipped to be operated by a person with a disability or to transport										
an occupied wheelchair/scooter with a lift, ramp, or secured system, <u>in accordance with 49 C.F.R. part 568 or 595</u> . Yes No										
Warning: You are required by law to state the true selling price. A false statement is in violation of section 2921.13 of the Ohio Revised Code (R.C.) and is punishable by six months imprisonment and a fine of up to one thousand dollars or both. All transfers are audited by the Department of Taxation. The seller and buyer must provide any information requested by the Department of Taxation. The buyer may be assessed any additional tax found to be due.										
Applicant's S	Signature <u>X</u>									
Co-Applican										
Sworn to and subscribed in my presence this day of, 20 in County,										
State of										
State of (Notary Seal)										

Signature of Notary Public or other Authorized Officer by law

NOTE: A motor vehicle dealer licensed in accordance with 4517 of the R.C., who is the owner or purchaser of the motor vehicle, is not required to have this document notarized under section 4505.063 of the R.C.

_My commission expires _