CERMINICATE OF THURSTORS A MICHOR VEHICUS

Vehicle information found here - VIN, Make, Model, Title Number

Title issue date, Odometer, Tax Base, Plate

IF THERE IS A LIEN HOLDER IT WILL BE SHOWN HERE

If there is a lienholder showing on the title - we require a lien release in order to transfer

Owner(s) Listed Here

If more than one owner, we need ALL owners signatures as sellers

Please write phone number here

ASSIGNMENT BY SELLER (TRANSFEROR)						
FEDERAL AND STATE LAWS REQUIRE THAT YOU STATE THE MILEAGE IN CONNECTION WITH THE TRANSFER OF OWNERSHIP, MINNESOTA LAW REQUIRES THAT YOU MAKE A DISCLOSURE ABOUT DAMAGE TO THE VEHICLE. A FALSE OR FRAUDULENT STATEMENT OF PURCHASE BY ANY PERSON IS A GROSS MISDEMEANOR OR FELONY.						
ODOMETER DISCLOSURE STATEMENT. I (WE) CERTIFY THAT THE ODOMETER NOW						
READS(NO TENTHS) MILES AND TO THE BEST OF I	MY	☐ EXCEEDS MECHANICAL LIMITS OF ODOMETER ☐ IS NOT ACTUAL MILEAGE – WARNING ODOMETER DISCREPANCY				
DAMAGE DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE, THIS VEHICLE: HAS HAS NOT (CHECK ONE) SUSTAINED DAMAGE IN EXCESS OF 80 PERCENT ACTUAL CASH VALUE.						
ASSIGNMENT: I (WE) CERTIFY THAT THIS VEHICLE IS FREE FROM ALL SECURITY INTERESTS, WARRANT TITLE, AND ASSIGN THE REGISTRATION TAX AND VEHICLE TO:						
SELLER'S PRINTED NAME(S) DATE OF SALE BUYER'S PRINTED NAME(S)						
SELLER'S ADDRESS DEALER'S LICENSE # BUYER'S ADDRESS					S ADDRESS	
SELLER'S SIGNATURE(S) APPLICATION FOR TITLE BY BUYER (TRANSFEREE). MUST BE SUBMITTED WITHIN 10 DAYS (Please Print)						
BUYER'S NAME (LAST) (FIRST)	(MIDDLE)	DATE(S) OF BIRTH BUYER'S DRIVER'S LIC			ENSE NUMBER(S)	
If more than one buyer - their information goes here						
ADD'L BUYER'S NAME(8) (LAST) (FI-RST)	(MODLE)	DANTES) OF BURTH BUYER'S DRIWER'S		ER'S DRIWER'S LICE	ICENS NUMBER(S)	
SIREET ADDRESS	CIAN	cou	UNTY/CODE		STATE	ZIP CODE
IS THIS VEHICLE SUBJECT TO SECURITY AGREEMENT(\$13 DO YES (IF YES, COMPLETE SECTION BELOW)						
Only fill this out if you took a loan out to purchase the vehicle Date of Security Markement				EEMENT		ADDITIONAL SECURED PARTIES, ICH COMPLETED FORM PS 2017
STREET ADDRESS	Q TY			İ.	ST ATE	ZIP CODE
I (WE) CERTIFY (WE) AM (ARE) OF LEGAL AGE, HAVE PURCHASED THIS VEHICLE SUBJECT TO LIENS SHOWN AND NO OTHERS, I (WE) ATTEST BY THIS TRANSACTION THAT THIS VEHICLE IS AND WILL CONTINUE TO BE INSURED WHILE OPERATED UPON THE PUBLIC STREETS AND HIGHWAYS. ALL OF MY (OUR) DECLARATIONS ARE TRUE AND CORRECT.						
All buyers must sign here (NOT the seller)					MINNESOTA COUNTY OROTHER STATE WHERE VEHICLE IS KEPT	
APPLICANT'S BUYER'S SIGNATURE(S) All Must Sign IMPORTANT - PLEASE READ: ALL INFORMATION COLLECTED ON THIS APPLICATION IS REQUIRED BY LAW AND IS USED TO IDENTIFY THE MOTOR VEHICLE. FAILURE TO PROVIDE REQUIRED INFORMATION MAY RESULT IN DENIAL OF THE REQUIRED INFORMATION EXCEPTED CERTAIN USES PERMITTED BY FEDERAL AND STATE LAWS, PERSONAL INFORMATION CONTAINED IN YOUR APPLICATION MAY NOT BE DISCLOSED TO ANYONE WITHOUT YOUR EXPRESS CONSENT. YOU MAY EXPRESSLY CONSENT TO THE DISCLOSURE OF YOUR INFORMATION BY WRITING TO THE FOLLOWING ADDRESS:						

SELLER'S NOTICE OF SALE

When you sell this vehicle, you are responsible to file the information on the back side of this notice with the Department of Public Safety within10 days. Please file this information over the internet at dys.gps.mn.gov. call 651-284-1234, or complete all the information on this notice and mail to the address below. This notice is not required if sold to a Minnesota licensed dealer.