



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

**OWNERSHIP ASSIGNMENT AND TITLE APPLICATION FOR
INSURANCE COMPANIES**

Power of attorney to transfer ownership and attestation of mileage and identity for the transfer of ownership of a vehicle from a person to an insurance company by chapter 4505 pursuant to Ohio Revised Code (R.C.) 4505.07 / 4505.11 and application for certificate of title.

- **For scenarios that fall under R.C. 4505.11(C)(1)(b):** The "Vehicle Information" and "Application for Certificate of Title" sections should be completed.
- **For scenarios that fall under R.C. 4505.11(C)(1)(c):** All sections on this form should be completed (any exceptions are noted below).

VEHICLE INFORMATION (Type or Print in Ink.)

| | | | |
|------|------|--------------|----------------|
| YEAR | MAKE | MODEL | BODY TYPE |
| VIN | | TITLE NUMBER | CONTROL NUMBER |

POWER OF ATTORNEY (Note: If a separate Power of Attorney, or appropriate document, is submitted, the information in this box does not need to be completed.)

I (we), the current titled owner, appoint _____ as my true and lawful attorney-in-fact to execute any and all application for assignment of Certificate of Title for the motor vehicle listed above.

TRANSFEROR'S / SELLER'S PRINTED NAME

TRANSFEROR'S / SELLER'S PRINTED ADDRESS

CITY

STATE

ZIP

TRANSFEROR'S / SELLER'S SIGNATURE

DATE

X

ASSIGNMENT OF OWNERSHIP

This vehicle was a (if applicable) ☐ Law Enforcement Vehicle ☐ Flood Vehicle ☐ Taxi

I (we) certify the vehicle described in this document was transferred on _____ for the price of \$ _____ to:
DATE

TRANSFeree / BUYER'S PRINTED NAME

TRANSFeree / BUYER'S PRINTED ADDRESS

CITY

STATE

ZIP

Warning to transferor and transferee (seller and buyer): You are required by law to state the true selling price. A false statement is in violation of section 2921.13 of the R.C. and is punishable by six months imprisonment or 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 due.

ODOMETER CERTIFICATION Federal and State laws require that you state the mileage in connection with transfer of ownership. Failure to complete or providing false information may result in fines and / or imprisonment.

I (we) certify to the best of my (our) knowledge that the odometer now reads:

CHECK ONE

- ☐ Actual Mileage
☐ The Mileage stated is in EXCESS of the Mechanical Limits
☐ The odometer reading is not the actual Mileage.
WARNING Odometer Discrepancy

, miles (no tenths)
thousands

Seller is a minor: ☐ YES ☐ NO

TRANSFEROR / SELLER'S PRINTED NAME

TRANSFEROR / SELLER'S PRINTED ADDRESS

CITY

STATE

ZIP

TRANSFEROR / SELLER'S SIGNATURE

DATE

X

BUYER ACKNOWLEDGEMENT OF ABOVE ODOMETER CERTIFICATION

TRANSFeree / BUYER'S PRINTED NAME

TRANSFeree / BUYER'S SIGNATURE

DATE

X

APPLICATION FOR CERTIFICATE OF TITLE (Type or Print in Ink) Additional fee of \$5.00 for failure to apply for title within 30 days of assignment.

Check Type of Title Requested (Check One)

☐ Salvage ☐ Salvage Replacement ☐ Salvage Duplicate ☐ Lost ☐ Stolen ☐ Destroyed

APPLICANT'S / BUYER'S PRINTED NAME

SSN / EIN

APPLICANT'S / BUYER'S PRINTED ADDRESS

CITY

STATE

ZIP

COUNTY

PURCHASE PRICE

\$

TAX PAID

\$

IF TAX EXEMPT, STATE REASON

VENDOR NUMBER

Lien Information: If no lien, state "none". If more than one lien, attached statement of all additional liens

LIENHOLDER'S PRINTED NAME

LIENHOLDER'S ADDRESS

CITY

STATE

ZIP

Condition of Vehicle (Check Only One)

☐ Good☐ Fair☐ Poor☐ Wrecked

Print Title

☐ Yes☐ NoIs 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, **in accordance with 49 C.F.R. part 568 or 595.**☐ Yes ☐ No**NOTE: All blank spaces above must be completed before acknowledgement. If not applicable, insert NA or NONE in the space provided.**

I (we) state that all information contained in this application is true and correct.

APPLICANT'S / BUYER'S SIGNATURE

X

DATE

NOTE: An insurance company is not required to have this application for a salvage certificate of title, any supporting power of attorney, and any other appropriate document notarized in accordance with section 4505.11 of The Ohio Revised Code.