

STATE OF MICHIGAN

APPLICATION FOR MICHIGAN TITLE & REGISTRATION STATEMENT OF VEHICLE SALE

DEPARTMENT OF STATE

Purchase Date

Delivery Date

Invoice/Stock No.

Dealer

Address

City

County State Zip Code MICHIGAN

Dealer License Sales Tax License Phone Number

Vehicle Sold New Used Demo Trade-In Yes No

Trade-In Year Make Vehicle No.

TEMPORARY VEHICLE REGISTRATION USED TO TRANSFER PLATES Expires 15 days after delivery date

VEHICLE USE AND HISTORY DISCLOSURE:

- POLICE VEHICLE VEHICLE HAS BEEN FLOOD-DAMAGED GOVERNMENT VEHICLE SALVAGE TITLE HAS PREVIOUSLY BEEN ISSUED TAXI

ODOMETER MILEAGE

The following section must be completed when odometer disclosure is required. The odometer mileage reading must match the mileage reading disclosed to the purchaser on the title and/or mileage statement.

Factory Installed Accessories Factory List Affixed To Vehicle

Dealer Installed Accessories When Optional to Purchaser

REMARKS:

CONTRACTUAL DISCLOSURE STATEMENT FOR USED VEHICLES ONLY The information you see on the window form for this vehicle is part of this contract.

I CERTIFY I SOLD THIS VEHICLE TO THE PURCHASER NAMED IN THIS FORM. I WARRANT THE TITLE TO THE VEHICLE AND CERTIFY THAT THE VEHICLE IS SUBJECT ONLY TO THE SECURITY INTERESTS NAMED ABOVE.

Dealer's Signature

Title

PURCHASER WARNING: DO NOT SIGN BLANK FORM

I am purchasing or leasing this vehicle and am applying for a Michigan certificate of title and registration or, if the lessee, applying for a registration. I certify my driver license is not suspended, revoked, or denied as a repeat offender and I am eligible to purchase or register this vehicle. I further certify that if a tax exemption is shown above it is valid.

Date X Date X Date X Date X Purchaser's/Lessor's Signature(s)

Expires On Month Day Year Months NEW PLATE RENEWAL TRANSFER Year Make Body Style Code County Vehicle No. Fee Category/Weight License Fee Driver License No./PIDs of All Owners or Lessees Title Title Late Fee Complete Names and Addresses of All Owners or Lessors Tax Reg. Transfer Fee Total - Transfer to #4 Complete Names and Addresses of All Lessees Full Rights to Survivor Yes No Insurance Company Policy No. or Binder No. Filing Date

First Secured Interest Address City-State Zip Filing Date Second Secured Interest Address City-State Zip Filing Date

1. PURCHASE PRICE OF VEHICLE (Including Freight & Accessories) 2. OTHER TAXABLE CHARGES (Documentary Fee, Service Fee, Temp. Reg. Fee, Etc.) 3. TOTAL TAXABLE PRICE 4. (Above total) SALES TAX - LICENSE - TITLE 5. NON-TAXABLE CHARGES (Labor, Service Contract, Etc.) 6. TOTAL DELIVERED PRICE 7. CASH ON DEPOSIT 8. CASH DUE ON DELIVERY 9. TRADE-IN 10. LESS LIEN 11. TOTAL DOWN PAYMENT 12. UNPAID BALANCE TO BE FINANCED 13. INSURANCE CHARGE\* 14. TOTAL AMOUNT OF FINANCE CONTRACT

\*TYPE OF INSURANCE WARNING: This insurance is not PL/PD No Fault Insurance required by Michigan Law. CREDIT LIFE HEALTH & ACCIDENT GAP INSURANCE Temporary Registration No. Temporary Fee Charged Yes No Salesperson