

STATE OF MINNESOTA

CERTIFICATE OF TITLE FOR A MOTOR VEHICLE

VEHICLE IDENTIFICATION NUMBER	YEAR 75	MAKE N0TH	MODEL/BODY TR	TITLE NUMBER
DATE ISSUED 06/19/02	ODOMETER N/REQD	TAX BASE 012000	CODE 26	PLATE NUMBER EXP 02
NO SECURITY INTERESTS			DOB	OWNER

Seller signs 1X on the Seller's Line

Buyer Signs 2X -- 1X on the front
1X on the back

John Robert Hopkins
123 Boundary Lane
Maple Grove, MN 55369

ASSIGNMENT OF OWNERSHIP

ODOMETER DISCLOSURE STATEMENT. I (WE) CERTIFY THAT THE ODOMETER NOW READS _____ (NO TENTHS) MILES AND TO THE BEST OF MY KNOWLEDGE THE ODOMETER MILEAGE IS:
☐ ACTUAL MILEAGE
☐ EXCEEDS MECHANICAL LIMITS OF ODOMETER
☐ 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 70% ACTUAL CASH VALUE.
POLLUTION SYSTEM DISCLOSURE STATEMENT. TO THE BEST OF MY KNOWLEDGE THE POLLUTION CONTROL SYSTEM ON THIS VEHICLE INCLUDING THE RESTRICTED GASOLINE PIPE
☐ HAS ☐ HAS NOT (CHECK ONE) BEEN REMOVED, ALTERED OR RENDERED INOPERATIVE.
Assignment: I (we) certify that this vehicle is free from all security interests, warrant title, and assign to registration tax and vehicle to:

/ /

SELLER'S PRINTED NAME(S)

DATE OF SALE

BUYER'S PRINTED NAME(S)

SELLER'S ADDRESS

DEALER LICENSE #

BUYER'S ADDRESS

Seller's Signature

X

Buyer's Signature

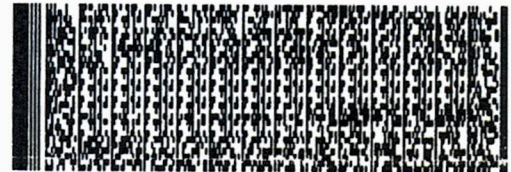
SELLER'S SIGNATURE(S)

BUYER'S SIGNATURE(S)

IMPORTANT — PLEASE READ: All information collected on a motor vehicle application is required by law and is used to identify your motor vehicle. Failure to provide required information may result in denial of the requested action. Except for 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:

MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER AND VEHICLE SERVICES DIVISION
445 MINNESOTA STREET, ST. PAUL, MINNESOTA 55101
PHONE 651-297-2126 TTY 651-282-6555
www.dps.state.mn.us/dvs

PS2700-11



KEEP IN A SAFE PLACE - ANY ALTERATION OR ERASURE VOIDS THIS TITLE

SELLER'S NOTICE OF SALE

When you sell this vehicle, you are responsible to file the information below with the Department of Public Safety within 10 days. You may file over the Internet at www.dps.state.mn.us/dvs or complete this post card and mail. **This notice is not required if sold to a licensed dealer.** MN Statute 168A.10



Title Number	Vehicle Identification Number
Date of Sale	
Purchaser's Driver License Number (if any)	
Purchaser's Full Name	Purchaser's Date of Birth
Street Address	
City	County State Zip Code

PLEASE PRINT

MINNESOTA MOTOR VEHICLE REGISTRATION CARD

YR 75 MK N0TH MDL TR
VIN

GROSS VEHICLE WEIGHT/BASE VALUE 012000

PLATE #

EXP
02/28/

STICKER #

TAX
21.

RECORDED OWNER(S):

CONTROL
NUMBER 50274899

Federal and state laws require that you state the mileage in connection with the transfer of ownership. Minnesota law requires that you make disclosures about pollution control equipment and damage to the vehicle. A false or fraudulent statement of purchase by any person is a gross misdemeanor or felony.

SALES TAX DECLARATION AND FEES

FULL PURCHASE PRICE..... \$
LESS TRADE-IN ALLOWANCE*.....
NET PURCHASE PRICE.....
% OF NET PURCHASE PRICE.....
LESS TAX PAID TO ANOTHER STATE (proof required).....
NET SALES TAX DUE \$

REGISTRATION TAX	\$	
PLATE FEE		
ARREARS TAX		
P.S.V. FEE		
TRANSFER TAX		
TITLE/TRANSFER FEE		
SALES TAX		
LATE TRANSFER PENALTY		
SUBTOTAL	\$	
STATE/DEPUTY FILING FEE		
TOTAL DUE	\$	

*TRADE-IN WAS A:

MODEL YEAR MAKE PLATE OR VEHICLE IDENTIFICATION NUMBER

I DECLARE THIS TAX EXEMPTION CODE:	Minnesota Dealer License Number:
	Minnesota Sales Tax Account Number:
	Internal Revenue Code Number (IRC):
	Prorate Account Number (Sales tax due when registered):

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SELLER'S PRINTED NAME(S)

DATE OF SALE

BUYER'S PRINTED NAME(S)

SELLER'S ADDRESS

DEALER LICENSE #

BUYER'S ADDRESS

X

X

SELLER'S SIGNATURE(S)

BUYER'S SIGNATURE(S)

APPLICATION FOR TITLE BY BUYER (TRANSFeree). MUST BE SUBMITTED WITHIN 10 DAYS (PLEASE PRINT)

Buyer's Name(s) (Last)	(First)	(Middle)	Date(s) of Birth	Buyer's Driver License Number(s)
Street Address	City	County/Code	State	Zip Code
Name of Insurance Company	Policy Number			

IS THIS VEHICLE SUBJECT TO SECURITY AGREEMENT(S)? ☐ NO ☐ YES (IF YES, COMPLETE SECTION BELOW)

First Secured Party's Name (Print Name)

Date of Security Agreement

For additional secured parties, attach completed form No. PS2017

Street Address

City

State

Zip Code

I (WE) CERTIFY I (WE) AM (ARE) OF LEGAL AGE, HAVE PURCHASED THIS VEHICLE SUBJECT TO LIENS SHOWN AND NO OTHERS.

THIS VEHICLE IS AND WILL CONTINUE TO BE INSURED WHILE OPERATING UPON THE PUBLIC STREETS AND HIGHWAYS. ALL OF MY (OUR) DECLARATIONS ARE TRUE AND CORRECT.

X Buyer's Signature

APPLICANT'S/BUYER'S SIGNATURE(S) All Must Sign

FOR YOUR PROTECTION

UPON THE SALE OF A VEHICLE TO A PRIVATE PARTY, WE RECOMMEND THAT THE SELLER AND BUYER TAKE THE COMPLETED TRANSFER TO A DEPUTY REGISTRAR OR THE DEPARTMENT OF PUBLIC SAFETY, DRIVER AND VEHICLE SERVICES DIVISION.

Post Office Will
Not Deliver Mail
Without Proper
Postage

RECEIPT FOR OFFICE USE ONLY

Registration Tax (if applicable)	
Sales Tax	
Total Fees/Taxes Paid	

MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER & VEHICLE SERVICES DIVISION
445 MINNESOTA STREET, SUITE 168
ST PAUL, MN 55101-5168