



NOTICE OF SATISFACTION OF SECURITY INTEREST OR LIEN HOLDER'S AFFIDAVIT

Instructions: This Affidavit should be executed by the person who holds a security interest or lien on the motor vehicle described below, pursuant to Article 3 of Chapter 3 in Title 40. Except for signatures, type or print legibly in black or blue ink or complete electronically and print.

Note: This form is not permitted for use by any participant in the Electronic Lien on Title (ELT) for any security interest or lien which has been recorded electronically.

Personally appearing before the undersigned officer, duly authorized by law to administer oaths, comes

_____, of
Printed Full Legal Name of Sole Proprietor/Partner or Executive Officer and Driver's License Number

_____, located at
Legal Business Name of Security Interest or Lien Holder as listed on Certificate of Title

Business address, including city, state and zip code

Owner(s) names as it appears on Certificate of Title

Residence address, including city, state and zip code

Vehicle Year & Make:

Vehicle Identification Number:

Model & Body Style:

State of Title Records:

Title number:

Account number:

I understand that, pursuant to the Motor Vehicles Certificate of Title Act, the State Revenue Commissioner has the authority to investigate issues surrounding the titling and registration of motor vehicles and may refuse to issue a certificate of title if there are reasonable grounds to believe that the application contains a false statement or the applicant fails to furnish required information or documents or any additional information the commissioner reasonably requires. I understand that the Department may have information as to the vehicle's title history, the security interest holder's or the owner's address, or some other information that is relevant to the Act's requirements, which lien holder does not have. I understand that, based upon this information, the Department has the discretion to reject the application for title.

Yes

Notary Public Acknowledgement

I am over the age of majority and give this affidavit on the basis of my personal knowledge of facts and circumstances surrounding the security interest or lien related to the motor vehicle listed:

Sole Proprietor/Partner or Executive Officer Signature

Date

Sworn to and subscribed before me this _____ of
(Day)
_____, _____
(Month) (Year)

Notary Public residence address including City, State and Zip Code

Notary Public's Signature & Notary Seal or Stamp

Notary Public's Printed Name

Date Notary Commission Expires:

Notary Public business phone number

**This form must be legibly completed and attached to the application for Certificate of Title.
Any alteration or correction voids this form.
All previous revisions of this form are obsolete.**