**DMV RELEASE OF LIABILITY FORM**

**VEHICLE INFORMATION**

Vehicle Identification Number: [VIN] Make: [MAKE]

Model: [MODEL] Year: [YEAR] Plate Number: [PLATE NUMBER]

Odometer Reading: [ODOMETER READING] Title Number: [TITLE NUMBER]

**TRANSFER INFORMATION**

Transfer Date: [DATE] Selling Price: $[AMOUT] (if applicable)

**TRANSFEREE (BUYER) INFORMATION**

Name: [TRANSFEREE'S NAME]

Address: [STREET ADDRESS]

City: [CITY] State: [STATE] ZIP Code: [ZIP CODE]

**TRANSFEROR (SELLER) INFORMATION**

Name: [TRANSFEROR'S NAME]

Address: [STREET ADDRESS]

City: [CITY] State: [STATE] ZIP Code: [ZIP CODE]

**CERTIFICATION**

I, the above listed transferor, hereby certify that I am the previous owner of the motor vehicle described above and have assigned and delivered the certificate of title to the transferee, thereby releasing my interest in said motor vehicle.

**Transferor’s Signature**: [\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_](https://esign.com/) Date: [DATE]

Print Name: [TRANSFEROR'S PRINTED NAME]