

Affidavit Supporting Certificate of Title Bond Application

Applicant							
Full Legal Name of Applicant for Georgia Title:			Georgia Drivers License or Identification Number:				
A dealer must first acquire the bonded Certificate of Title prior to assignment or transfer of the vehicle.							
Street Address including City, State & Zip Code:			County of Residence:				
Provide the full legal name and address of the person from whom the vehicle was acquired.							
Seller or Dealer's (Transferor's) Full Legal Name:			Georgia Drivers License or Identification Number:				
Seller's/Transferor's Street Address including City, State and Zip Code:							
A full and complete statement siving the vector the vehicle's Contificate of Title connect he provided. This							
A full and complete statement giving the reason the vehicle's Certificate of Title cannot be provided. This statement is subject to verification and validation of the vehicle history and satisfaction of any security interest or lien:							
Vehicle Year & Make:	Vehicle Identif	ficat	tion Number:	Model (Length & Width, if			
				mobile/manufactured home)			
State where vehicle is titled (attach Vehicle History Report from the state of issuance):							
Are there any security interests or liens shown on the Vehicle History Report? If yes, attach release of the security interest or lien.							
						□No	
If yes, use of a Surety Bond is prohibited.							
Has an insurance company ever made a 'total loss' settlement or has this vehicle ever been \Boxed{\text{\$\sigma}} Yes \Boxed{\text{\$\sigma}} No							
wrecked to such an extent that its restoration required the replacement of two (2) or more major component parts? If yes, vehicle must first be scheduled for a salvage vehicle inspection.							
Oath and Affirmation							
The undersigned hereby swears and affirms under oath that of his/her own personal knowledge, the information							
contained herein is true and correct:							
Sworn to and subscribed before me this of (Day)			Printed Name of Applicant for Georgia Certificate of Title:				
(Month)							
(Month) (Year) Notary Public's Signature & Notary Seal/Stamp:		Signature of Applicant for Georgia Title:					
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Notary Public's Printed/Typed Name:		Date Notary Commission Expires:					