

**STATE OF ARKANSAS
STATEMENT OF FACTS FOR
ISSUANCE OF A BONDED TITLE**

If applying for a bonded title on a **motor vehicle**, this form must be accompanied by a verification of the motor vehicle identification number (VIN) on the form prescribed by the Arkansas State Police. The verification shall be conducted by a certified law enforcement officer of any city or county in Arkansas or by the Arkansas State Police or a designee of the Arkansas State Police.

I the undersigned request to be approved to pursue bonded title procedures to obtain a certificate of title for the following vehicle:

Year	Make	Model	Body Style	Dimensions if Mobile Home	Vehicle Identification Number

I hereby swear and affirm that to the best of my knowledge the vehicle described above is not subject to any of the following conditions and that the explanation that follows is an accurate account of how and from whom the vehicle was obtained.

1. The vehicle has not been issued a junking certificate or similarly branded certificate of title.
2. The vehicle is not subject to a mechanics or storage lien.
3. The vehicle is not stolen.
4. The vehicle is not involved in ownership litigation.

Briefly explain how and from whom the vehicle was obtained:

Applicant' Printed Name _____ Date _____

Applicant's Address (Please Print) _____

City, State, Zip (Please Print) _____

Signature of Applicant _____

Return this completed form to: Department of Finance and Administration
 Office of Motor Vehicle - Bonded Titles
 P.O. Box 1272
 Little Rock, AR 72203

Upon receipt of this form, the bonded title agent will research Office of Motor Vehicle records to determine if bonded title procedures may be used to obtain title for the vehicle described herein. If so, you will receive bond forms and a letter of approval with further instructions. If not, you will be sent a letter of explanation as to why you are not approved. Please allow ten (10) to twenty (20) business days processing time. If you have questions you may call (501) 682-4679.