



OHIO DEPARTMENT OF PUBLIC SAFETY  
BUREAU OF MOTOR VEHICLES

**OWNERSHIP ASSIGNMENT AND TITLE APPLICATION  
FOR CASUAL SALE**

Ohio Revised Code Section 4505.032

THIS FORM MAY BE USED WHEN BOTH OF THE FOLLOWING APPLY

- The certificate of title is being held electronically: no physical (paper) certificate of title has been issued.
- The electronic title is being transferred and neither the seller nor the buyer is a licensed Ohio dealer.

**Erasures and alterations void this title assignment. (type or print in ink)**

**VEHICLE INFORMATION**

YEAR	MAKE	MODEL	BODY TYPE
VIN		TITLE NUMBER	CONTROL NUMBER

**OWNER INFORMATION** (as listed on the current title)

CURRENT OWNER(S) / SELLER'S PRINTED NAME			
CURRENT OWNER(S) / SELLER'S ADDRESS	CITY	STATE	ZIP

**ASSIGNMENT OF OWNERSHIP BY CURRENT OWNER / SELLER**

This vehicle was a (if applicable)  Law Enforcement Vehicle  Flood Vehicle  Taxi

I (we) certify the vehicle described in this document was transferred on \_\_\_\_\_ for the price of \$ \_\_\_\_\_ to:  
DATE

TRANSFeree / BUYER'S PRINTED NAME			
TRANSFeree / BUYER'S PRINTED ADDRESS	CITY	STATE	ZIP

**Warning to transferor and transferee (seller and buyer):** You are required by law to state the true selling price. A false statement is in violation of section 2921.13 of the R.C. and is punishable by six months imprisonment or a fine of up to one thousand dollars or both. All transfers are audited by the Department of Taxation. The seller and buyer must provide any information requested by the Department of Taxation. The buyer may be assessed any additional tax found due.

**ODOMETER CERTIFICATION** Federal and State laws require that you state the mileage in connection with transfer of ownership. Failure to complete or providing false information may result in fines and / or imprisonment.

I (we) certify to the best of my (our) knowledge that the odometer now reads:

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	miles (no tenths)
thousands						

**CHECK ONE**

- Actual Mileage
- The Mileage stated is in EXCESS of the Mechanical Limits
- The odometer reading is not the actual Mileage.  
WARNING Odometer Discrepancy
- Exempt from mileage disclosure (e.g., APV, Repossession, Inheritance).

Seller is a minor:  YES  NO If yes, BMV 3751 Form required

TRANSFEROR / SELLER'S PRINTED NAME			
ADDITIONAL TRANSFEROR / SELLER'S PRINTED NAME (if applicable)			
TRANSFEROR / SELLER'S PRINTED ADDRESS	CITY	STATE	ZIP
TRANSFEROR / SELLER'S SIGNATURE			DATE
X ADDITIONAL TRANSFEROR / SELLER'S SIGNATURE (Must sign in front of Notary/Authorized Officer)			DATE
X			

**NOTE: All blank spaces above must be completed before acknowledgement. If not applicable, insert NA or NONE in the space provided.**

**Notary:**

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ in \_\_\_\_\_ County,

State of \_\_\_\_\_

(Notary Seal)

X \_\_\_\_\_ My commission expires \_\_\_\_\_

Signature of Notary Public or other Authorized Officer by law

**BUYER ACKNOWLEDGEMENT OF ABOVE ODOMETER CERTIFICATION**

TRANSFeree / BUYER'S PRINTED NAME	
TRANSFeree / BUYER'S SIGNATURE <b>X</b>	DATE

**APPLICATION FOR CERTIFICATE OF TITLE** (Type or Print in Ink) Additional fee of \$5.00 for failure to apply for title within 30 days of assignment.

Check Type of Title Requested <input type="checkbox"/> Original <input type="checkbox"/> Salvage    (Check One)			
APPLICANT'S / BUYER'S PRINTED NAME		SSN / EIN	
CO-APPLICANT'S / BUYER'S PRINTED NAME		SSN / EIN	
APPLICANT'S / BUYER'S PRINTED ADDRESS		COUNTY OF RESIDENCE	
CITY		STATE	ZIP
PURCHASE PRICE \$	TAX PAID \$	IF TAX EXEMPT, STATE REASON	
Condition of Vehicle (Check Only One) <input type="checkbox"/> Good <input type="checkbox"/> Fair <input type="checkbox"/> Poor <input type="checkbox"/> Wrecked Print Title <input type="checkbox"/> YES <input type="checkbox"/> NO			
Lien Information: If no lien, state "none". If more than one lien, attached statement of all additional liens.			
LIENHOLDER'S PRINTED NAME			
LIENHOLDER'S ADDRESS		CITY	STATE    ZIP

NOTE: All blank spaces above must be completed before acknowledgement. If not applicable, insert NA or NONE in the space provided.

I (we) state that all information contained in this application is true and correct.

APPLICANT'S / BUYER'S SIGNATURE (Must sign in front of Notary/Authorized Officer) <b>X</b>	DATE
CO-APPLICANT'S / BUYER'S SIGNATURE (Must sign in front of Notary/Authorized Officer) <b>X</b>	DATE

**LATE FEE OF \$5.00 FOR FAILURE TO APPLY FOR TITLE WITHIN 30 DAYS OF ASSIGNMENT**

Notary:

Sworn to and subscribed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ in \_\_\_\_\_ County,

State of \_\_\_\_\_.

(Notary Seal)

**X** \_\_\_\_\_ My commission expires \_\_\_\_\_  
Signature of Notary Public or other Authorized Officer by law