

ATV or OFF-HIGHWAY MOTORCYCLE
AFFIDAVIT ATTESTING TO OWNERSHIP

This form must be completed and surrendered to the Clerk of
Courts prior to issuance of initial title.
TYPE OR PRINT IN INK.

State of Ohio, County of _____

Name _____

Address _____
Street City/State Zip

The above named individual hereby declares under penalty of
perjury that he/she is witness to the ownership of the
following described ATV or Off-Highway Motorcycle.

Year _____ Make _____ Body type _____

VIN _____ Model _____

And that, to the best of my knowledge, the above-described
ATV or Off-Highway motorcycle has never been titled in the
State of Ohio.

Having knowledge of ownership of said vehicle to one

(Owners name)

Residing at

Street address City/State Zip

Having knowledge of said ownership for _____
years/months

Witness signature _____

Sworn to and subscribed in my presence

by _____ this _____ day
of _____ in the year _____.

(seal)

Clerk, Deputy Clerk of Courts, Notary

My Commission Expires _____