

STATE OF WEST VIRGINIA
DEPARTMENT OF TRANSPORTATION
DIVISION OF MOTOR VEHICLES

BUY HERE – PAY HERE DEALER AFFIDAVIT

PURCHASER'S INFORMATION

| | | |
|-----------------------|--------------------------|-----------|
| _____ | _____ | _____ |
| (Purchaser's Name) | (Purchaser's Address) | (Phone #) |
| _____ | _____ | _____ |
| (Co-Purchaser's Name) | (CO-Purchaser's Address) | (Phone #) |

VEHICLE DESCRIPTION:

| | | | |
|-------|-------|-----------|-------------------------------|
| _____ | _____ | _____ | _____ |
| Make | Year | Body Type | Vehicle Identification Number |

LIEN INFORMATION:

Name of Lienholder _____

Address _____

Date of Sale _____ Lender Code

| | | |
|----------------------|--------------|-------|
| _____ | _____ | _____ |
| Total Amount of Lien | Kind of Lien | Date |

| | | |
|--------------------------|-------------------|------------------|
| _____ | _____ | _____ |
| Total Amount of Payments | Amount of Payment | Payment Due Date |

DEALER INFORMATION:

Name of Dealership _____ Dealer Number _____

Address _____

The Purchaser (s) do hereby acknowledge purchase of the vehicle described above and that the listed lienholder has a valid lien on the vehicle.

X _____ Date _____ C-Purchaser's Signature _____ Date _____

Purchaser's Signature

Dealer Representative's Signature Date

White Copy – Submit with original title work
Pink Copy – Dealer
Yellow Copy - Customer