

# Affidavit Of Repossession

## Idaho Transportation Department - Vehicle Services



1st Vehicle/Hull Identification Number			Title Number
2nd Vehicle/Hull Identification Number			Issue Date
Year	Make	Model	Repossession Date
Owners of Record (Name)		Address	
Lienholder of Record (Company Name)		Address	

I, the undersigned, certify under penalty of law, that the lien holder of record is the lawful owner of the above-described vehicle/vessel by reason of a conditional sale contract, chattel mortgage, or security agreement, and that the above-described vehicle/vessel was lawfully repossessed from the owner of record on the date shown above.

Furthermore, the lien holder agrees to indemnify the Idaho Transportation Department and all persons acting under their direction from any and all liability and shall defend all litigation which may arise as a result of the issuance of a new Certificate of Title on the above-described vehicle/vessel.

If a purchaser is named below, the lien holder conveys all rights, title, and interest to said vehicle/vessel to this purchaser and warrants the title thereto. The vehicle/vessel is free from all liens and encumbrances except as stated below.

Purchaser's Full Legal Name		Purchaser's Idaho Drivers License No. or EIN if Business - If no Driver's License Number enter SSN -	
Purchaser's Physical Address		City	State    Zip
Purchaser's Mailing Address (If Different)		City	State    Zip
Date Sold	Amount of Sale	New Lienholder	
<input type="checkbox"/> There is no transfer. Please issue a Title in the name of the Lienholder of Record.			
Odometer Reading (No Tenths)	<input type="checkbox"/> Actual Miles	<input type="checkbox"/> Exceeds Mechanical Limits	<input type="checkbox"/> Exempt
	<input type="checkbox"/> Not Actual <b>Warning – Odometer Discrepancy</b>		<input type="checkbox"/> No Device

We certify the above-stated odometer reading is correct to the best of our knowledge.

Lien Holder's Printed Name	Representative's Printed Name
Representative's Signature	Date

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, year \_\_\_\_\_  
 County of \_\_\_\_\_, State of \_\_\_\_\_

SEAL

My Commission Expires \_\_\_\_\_  
 Notary Public's or  
 ITD Agent's Signature \_\_\_\_\_