

AFFIDAVIT OF NON-DEALER TRANSFERS OF MOTOR VEHICLES AND BOATS

tax on the transfer of ownership. Tax-exempt relatives in	notor vehicle to certain relatives, those relatives do not have to p clude spouses, siblings, and lineal relatives (children, grandchildre at-grandparents). Spouses of children, grandchildren, and gre	
Gift transfer or low selling price to person other than tax-exempt relatives. Allow selling price is 75% or less of the fair market value. Fair market value is determined by referencing the most recent issue of an authoritative automob pricing manual, such as the N.A.D.A. Official Used Car Guide, SE Edition.		
Seller or Transferor (Please Print)	Purchaser or Transferee (Please Print)	
Name:	· · · · · · · · · · · · · · · · · · ·	
Address:		
City, State, Zip:		
Phone:	•	
	_ FEIN or Drivers License No.:	
Vehicle or Boat Information (To be completed by seller	or transferor):	
Year Make	(VIN or Serial No.)	
· · · · · · · · · · · · · · · · · · ·	value of the vehicle/boat: \$	
Is there a lien? Y/N If yes, wha	is the amount of the outstanding lien?	
If yes, who is the lienholder?		
If applicable, please state the relationship between Seller o	r Transferor and Purchaser or	
	if gift or low selling price only ransfer: (Please check all that apply)	
Money involved:	*,	
Loan Assumption, loan pay-off, etc.:		
Services or labor performed (Value): \$		
Other: (Explain)	***************************************	
Trade-in: (Trade-in must be of like kind, such a credit for trade-in)	s motor vehicle, motorcycle, boat, etc. in order to get sales tax	
Trade-in value: \$ Trade Description:		
	Year Make (VIN or Serial No.) Iles price is the <u>total</u> amount of consideration paid by the rd party, such as lienholder. If no consideration was given for	
If the sales price is <u>lower</u> than the average value please in	ndicate the reason for the low price:	
ion and belief, and this document correctly state the total a	rmation is true and correct to the best of my knowledge, information for the transfer of this vehicle or boat. sale or transfer of the aforementioned vehicle or boat may resugainst the purchaser.	
Seller or Transferor's Signature(s) Date	Purchaser or Transferee's Signature(s) Date	

RV-F1301201 (Rev. 5-22)

Purchaser or Transferee's Signature(s)

INTERNET (5-22)



TENNESSEE DEPARTMENT OF REVENUE Power of Attorney for Vehicle Transactions

RV-F1311401 (Rev. 2-21)

PURPOSE: To appoint an individual or entity to manage vehicle transactions on the behalf of another individual. (Tenn. Code Ann. § 34-6-101 and 102). Dealers must use a secure power of attorney (RV-F1316901) to transfer ownership when the original certificate of title is not available for the owner to make an odometer disclosure as required by The Motor Vehicle Information & Cost Savings Act of 1986; 49CFR580.

INSTRUCTIONS: Please complete the document below in its entirety. **NOTE:** This document is void if any information has been left blank or if any information entered hereon has been erased or altered by any means.

Date:			
,, do hereb (Name)	y appoint(Name_of	Attorney-in-fact Representative)	
(ivarrie) of	(
(Dusiness or Title Consider if application	ble) (St	reet Address)	
	as m	y attorney-in-fact to sign my name	
(City) (State)	(Zip Code)	to the control described berein	
o all applicable documentation relative to any title nderstand that these documents may contain the for or the disclosures made therein. This authority is <u>lim</u>	ederally mandated odometer c	lisciosure and that i am responsib	
Make:	VIN:		
/lodel:		Year:	
Check the appropriate box for each transaction ty			
Duplicate Title	☐ Vehicle Information F	Request	
☐ Noting of Lien		Application for Title and Registration	
Request for Verification of Ownership on	☐ Transfer of Title		
Vehicles Found Abandoned, Immobile or Unattended	Other (Specify):		
The area below is to be completed by the party gran	ting authority		
Individual	☐ Business	5:	
Business Name	(Printed Name of	Indívidual or Business Owner)	
(Physical Street Address) (City)	(State	e) (Zip Code)	
		(m 1 6 1 1)	
(Telephone Number)		(Email Address)	
D. A. CIVALONALI ED CAAFAIT.			
B. ACKNOWLEDGMENT: AFFIANT CERTIFICATION STATEMENT: I, the under	reigned affiant hereby certify the	hat the statements made herein a	

Date: __

Affiant's Signature: