

Michigan Department of State

CERTIFICATION

I, _____, whose signature appears
(print name)
below, certify the following information is true to the best of my knowledge:

| | | |
|------|-----|-----------|
| Year | VIN | |
| Make | | Title No. |

Please make statement or explain error:

| | |
|---|-------|
| Signature: X | Date: |
| If applicable, company, dealership, or organization name and your position with the company, dealership, or organization: | |