

State of Minnesota

Hennepin County

District Court

Judicial District:	Fourth
Court File Number:	
Case Type:	

Plaintiff

vs.

Defendant (VIN Number)

Defendant (seller of vehicle)

Commissioner of Public Safety
Defendant

**Notice of Motion, Motion, and
Affidavit for Order Directing
Issuance of Title to a Motor Vehicle
(Minn. Stat. §§ 168A.04, 168A.08 168A.25)**

NOTICE OF MOTION AND MOTION

**To: The Above-named Defendant:
and
The Commissioner of the Department of Public Safety
C/O MN Attorney General’s Office, Public Safety Division
445 Minnesota St, Suite 1800
St. Paul, MN 55101-2134**

Comes now the Plaintiff requesting an order of this Court directing the Department of Public Safety, Division of Motor Vehicle Registration to issue a title and registration for the below mentioned vehicle, License Plate No. _____,
Vehicle Identification Number _____
to _____
(name you want on the title, full address)

AFFIDAVIT

State of Minnesota)
) SS
County of _____)

I _____, state:
(first, middle, last)

1. I am the Plaintiff in this action. My date of birth is: _____.

2. I purchased the vehicle described below from _____
Name, Address, City, State and Zip Code of seller

for \$ _____ on _____.

Make _____ Model _____ Year _____
Date

License Plate No. _____ Vehicle Identification No. _____

Vehicle Body Type _____ New Used

Odometer _____

This is the true cumulative mileage.

It is unknown whether this is the true cumulative mileage.

To the best of buyer(s) knowledge this vehicle

has sustained damage in excess of 70% actual cash value

has not sustained damage in excess of 70% actual cash value.

3. I am the sole owner of this vehicle.

The following individual(s) is/are co-owner(s) of the vehicle: Provide first, middle, last name; address; and date of birth of each co-owner:

4. I paid in full the above amount and there is:

no other secured interest in the vehicle.

or

the secured party _____ has issued a Notice of Release.

In order of priority, list **Name, Address and Dates of security agreements** of any secured parties:

5. I have been unable to obtain a certificate of title from the former owner for the following reason(s):

I have been unable to locate the former owner to obtain the Certificate of Title for the vehicle.

Other (specify)

6. The reason given by the Department of Public Safety for not issuing a title is:

the Department has reasonable grounds to believe that I am not the owner of the vehicle;

the Department has reasonable grounds to believe that the application contains a false or fraudulent statement;

I have failed to furnish required information or documents or any additional information the Department reasonably requires;

I have not paid at least one month's registration tax or registered the vehicle under MS.168.187.

7. I was told that I could obtain a title for the vehicle only if I posted a bond in the amount of \$_____.

I have posted the bond.

I have not posted the bond.

or

I was told by the Department on _____ (date) that I do not qualify for the bond.

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature

Name: _____

Address: _____

City/State/Zip: _____

Telephone: (_____) _____

E-mail address: _____

Proof of Mailing

STATE OF MINNESOTA)
) SS
COUNTY OF _____)

I, _____, state that on _____, I served the Notice
(Full Name) (Date)
of Motion, Motion and Affidavit for Order Directing Issuance of Title to a Motor Vehicle and
Notice of Filing a Notice of Motion, Motion and Affidavit for Order Directing Issuance of Title
on _____

(Defendant's name)
by placing a true and correct copy thereof in an envelope addressed to him/her at their last known
address at: _____
(street address, city, state, zip code)

and depositing the same, with postage prepaid, in the United States Mail at _____
_____, Minnesota.
(city)

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116

Dated: _____

Signature
Name: _____
Address: _____
City/State/Zip: _____
Telephone: (_____) _____
E-mail address: _____

