



MINNESOTA DEPARTMENT OF PUBLIC SAFETY  
DRIVER AND VEHICLE SERVICES

**Statement of Facts**

*(Use when there is no vehicle ownership record - Minnesota Statute 168A.07)*

**Submit this completed form, along with the appropriate forms (see below) and fees, in person at a deputy registrar office, or by mailing to: Driver and Vehicle Services Division, 445 Minnesota Street, St. Paul, MN 55101-5187.**

- If you have questions or need additional information and forms visit [www.mndriveinfo.org](http://www.mndriveinfo.org). You may also contact Driver and Vehicle Services at 651-296-2605 (651-282-6555 for TTY).
- For deputy registrar locations visit [www.mndriveinfo.org](http://www.mndriveinfo.org); you may also contact 651-297-2005.
- Submit an *Application to Title and Register a Motor Vehicle* (PS2000) and photographs showing all sides of the vehicle; for motorcycles show both sides. Photos are not required for a trailer being registered at under 6,000 pounds gross weight.
- If major parts are replaced, attach original invoices/bills of sales and submit an *Affidavit of Reconstruction* (PS2025).

Note: a surety bond/certificate of deposit may be required.

**A. Vehicle Information**

_____	_____	_____	_____
Model Year	Vehicle Make	Body Type/Style	Vehicle Identification Number (VIN) or Motorcycle Frame Number
_____	_____	_____	_____
Last Known Plate Number	State of Issue	Expiration Date	Engine number (motorcycles only)

**B. History of Vehicle - complete in detail**

The vehicle was purchased/acquired from: \_\_\_\_\_

_____	_____
"Seller(s)" Address (Street, City, State, Zip Code)	Date Acquired

Explain how you acquired the vehicle and why there are no documents/record of ownership: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Explain the condition of the vehicle when you acquired it (be specific):

**C. Signatures and Verification - Signatures of the seller(s) and applicant(s) attest to the accuracy of the information and serve as a bill of sale**

I (we) attest to the accuracy of the above information:

\_\_\_\_\_

Printed Name of "Seller(s)"

\_\_\_\_\_

Signature of "Seller(s)"

I (we) attest to the accuracy of the above information and agree to defend and protect the state of Minnesota against any and all future claims of ownership that may arise if I am issued a title:

\_\_\_\_\_

Applicant ("Buyer") Printed Name(s)

\_\_\_\_\_

Applicant ("Buyer") Signature(s)