

Insurance Affidavit in Lieu of a Title

Purpose: Use this form to certify the unavailability of a Certificate of Title for a vehicle acquired as a result of a claim settlement by an insurance company.

Instructions: Complete this form in its entirety. All forms and applicable fees shall be submitted electronically to the Motor Vehicle Administration via an ERT participant or online at www.mva.maryland.gov. For a listing of ERT participants, please visit our website at www.mva.maryland.gov.

VEHICLE OWNER INFORMATION

OWNER NAME (PRINT)		CO-OWNER NAME (PRINT)	
OWNER'S SOUNDEX	DATE OF BIRTH	CO-OWNER'S SOUNDEX	DATE OF BIRTH

VEHICLE INFORMATION

TITLE NUMBER	YEAR	MAKE	MODEL	BODY STYLE	COLOR	VEHICLE IDENTIFICATION NUMBER (VIN)
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We are unable to present a Certificate of Title with respect to the vehicle described above because the Title is:
 Defective Lost Destroyed

APPLICATION FOR A SALVAGE CERTIFICATE

NAME OF INSURANCE COMPANY		COMPANY SOUNDEX	
STREET ADDRESS		CITY	STATE ZIP CODE
PHONE NUMBER		EMAIL ADDRESS	

To be completed by applicant:

The cost to repair the vehicle for highway operation is greater than 75% of the fair market value of the vehicle prior to sustaining the damage for which the claim was paid and the vehicle is repairable.

The vehicle is not rebuildable, will be used for parts only, and is not to be retitled.

The vehicle has been stolen.

The vehicle has sustained flood damage.

The vehicle has been acquired by an insurance company as a result of a claim settlement and the cost to repair the vehicle is 75% or less of the fair market value of the vehicle prior to sustaining the damage for which the claim was paid.

Odometer Disclosure Odometer reading _____ (No Tenths) <input type="checkbox"/> 1. The mileage stated is in excess of its mechanical limits. <input type="checkbox"/> 2. The odometer reading is not the actual mileage. Warning – Odometer Discrepancy	Date of Accident	Date of Claim Settlement
	Check Number	Check Amount

CERTIFICATION

I solemnly affirm, under penalties of perjury and upon personal knowledge, the contents of the foregoing document are true and correct to the best of my knowledge and/or belief.

I further certify that should any legal action arise as a result of issuing a salvage certificate, my application for same herein described, we hereby bind ourselves, our heirs, assigns and personal representatives to indemnify and save harmless the Maryland Motor Vehicle Administration for any loss or damage which may be asserted against it, or which may be sustained as a result thereof.

I hereby certify, under penalty of perjury, that the above referenced vehicle lien has been satisfied in full.

I further certify that in the event a lien or lienholder is later determined to exist, I will make full restitution to the lienholder and furnish the lien release to the Motor Vehicle Administration (MVA). I further certify that I will defend, indemnify and hold the MVA harmless against any claim from a lienholder or lien as a result of this Salvage Certificate being issued.

Any willful misinformation provided with fraudulent intent may be prosecuted under Maryland law.

PRINTED NAME OF AUTHORIZED REPRESENTATIVE	TITLE
SIGNATURE OF AUTHORIZED REPRESENTATIVE	DATE

Salvage Certificate Number (MVA Use Only) _____