

Vehicle Ownership Transfer Form

Current Owner Details

Full Name:

Address:

Contact Number:

New Owner Details

Full Name:

Address:

Contact Number:

Vehicle Details

Make:

Model:

Year:

VIN (Vehicle Identification Number):

License Plate Number:

Declaration & Consent

I hereby declare that all information provided above is true and correct to the best of my knowledge.

Current Owner's Signature:

Date:

New Owner's Signature:

Date:

Submit