



OFF-HIGHWAY VEHICLE STATEMENT OF FACTS

NRS 490.082

General Information:

- All areas must be completed in full and the information must correspond with the title or other documentation. Attach ownership documents; attempt to contact information and/or court order.
- If the OHV was purchased on or after the implementation date of the off-highway vehicle (OHV) title and registration program (July 1, 2012), Nevada law requires the owner to apply for a Nevada certificate of title.
- This Statement of Facts must be notarized.
- PLEASE NOTE: any alteration or erasure will require a new form be completed.
- A vehicle identification number (VIN) inspection by a Nevada licensed off-highway vehicle dealer or member of law enforcement is required (Reference form OHV 002). The DMV does not perform off-highway vehicle VIN inspections. Unless a VIN assignment must be completed.
- OHV transactions cannot be completed at DMV offices. All forms and fees (if any) must be mailed to the DMV at the address above, or taken to a licensed Nevada OHV dealer.
- Title fee must be submitted with the application. **Do not send cash.** The title fee is \$21.00 when the OHV is remaining in Nevada. Off-highway vehicles not physically located or registered in Nevada have a \$36.00 title fee. Additionally, a Title Processing Fee in the amount of \$8.25 must be charged on all title transactions that involve a complete change of ownership. There has been a Technology fee associated to each transaction.
- Please visit the OHV website at www.ohv.nv.gov for additional information.

Instructions:

- Enter the vehicle identification number (VIN) of the OHV. If the OHV does not have a VIN, it must be taken to a DMV inspection station. Please visit the OHV website at www.ohv.nv.gov for additional information.
- Enter the model year, OHV make (such as Polaris, Yamaha, Ski-Doo, etc), OHV model (such as Ranger, YZ 250, Summit, etc), and date of application.
- Choose a vehicle type from the supplied check boxes. If *Other* is chosen, please provide a brief explanation of the OHV type.
- Enter the full legal name of the applicant as it appears on the Nevada Driver's License or Identification Card, or the name of the business if the OHV will be registered to a business.
- Indicate "and" or "or" between names if more than one owner. *And* or *Or* indicator requires signatures of all owners to make changes to the Certificate of Title of the OHV. An *or* indicator means any owner may sign to make changes to the Certificate of Title of the OHV.
- Enter the number on the applicant's Nevada Driver's license or ID card, or the FEIN if the OHV is to be registered to a business. If the owner does not have a Nevada Driver's license, ID card or FEIN for a business, write "NONE."
- Leave *Date of Birth* blank when the owner is a business or trust.
- If more than one owner, repeat the steps above for the second owner.
- Enter the complete physical and mailing address of the applicant.
- Enter the lienholder information. If no liens exist, write the word "NONE" on the *Lienholder/Lessor* line.
- Enter the approximate date the OHV was obtained from the previous owner and information regarding ownership documents that were obtained.
- Enter the full legal name and address of the previous owner along with how long the previous owner owned the OHV (if known).
- Describe what happened to the title or other ownership documents. Enter any other information that may help verify ownership.
- Sign and date the affidavit in the presence of a notary.

OFF-HIGHWAY VEHICLE STATEMENT OF FACTS

Please Type or Print Using Blue or Black Ink

Include available ownership documents with this affidavit

Vehicle Identification Number

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Year: _____ Make: _____ Model: _____ Date: _____

OHV Type: Motorcycle Snowmobile All Terrain Vehicle Side by Side Dune Buggy
 Other (Please Explain) _____

Owner #1 Full Legal Name: _____ and
As it appears on the Nevada Driver's License or Identification Card, or Business Name or

Nevada Driver's License Number, Identification Card Number, or FEIN for a Business: _____

Date of Birth: _____ Phone Number: _____ E-Mail (Optional): _____

Physical Address: _____
Address City State Zip Code

Mailing Address: _____
Address City State Zip Code

Owner #2 Full Legal Name: _____
As it appears on the Nevada Driver's License or Identification Card, or Business Name

Nevada Driver's License Number, Identification Card Number, or FEIN for a Business: _____

Date of Birth: _____ Phone Number: _____ E-Mail (Optional): _____

Lienholder/Lessor: _____
Full Legal Name of Individual or Business

NV Driver's License Number, Identification Card Number, NV ELT # or FEIN for a Business: _____

Mailing Address: _____
Address City State Zip Code

History of the OHV

Said OHV was obtained on or about the _____ day of _____, Year _____, in the following manner (list documents presented and how those documents and the OHV were obtained): _____

Previous Owner: _____
First Middle Last

At the Address of: _____
Address City State Zip Code

How long did the previous owner own this OHV (if unknown, answer to the best of your ability)? _____

What happened to the title or other ownership documents? Other comments that will help substantiate ownership: _____

I hereby certify as the affiant and/or legal owner of the described off-highway vehicle that I do not have ownership documents for this OHV. He/she as the affiant and/or legal owner make representation to the Department of Motor Vehicles that the person or business listed on this affidavit as the registered owner will assume, fully pay, satisfy and discharge any and all liens, claims or encumbrances disclosed herein or any others that may be shown or proved to be upon or against said off-highway vehicle, and indemnify and save harmless said Department of Motor Vehicles and the State of Nevada on account of the issuance of said certificates of title on said off-highway vehicle to the undersigned, as aforesaid.

I hereby declare under penalty of perjury that the foregoing is true and correct.

State of Nevada, County of: _____

Signed and sworn to before me this _____ by _____
Date Name of person making statement

by: _____
Signature of Person Making Statement

Notary Public

Notary Stamp

Office Use Only Approved by _____ Date _____

Office _____ Phone _____