

**REGARDING ABSENCE OF EVIDENCE OF VEHICLE OWNERSHIP**

Petitioner's Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

County: \_\_\_\_\_ Phone Number: (\_\_\_\_\_) \_\_\_\_\_

Vehicle Description:

\_\_\_\_\_

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

VIN# \_\_\_\_\_

1. How did you obtain the vehicle? (If you purchased the vehicle, include date of transaction, person you bought it from, and how much you paid.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Submit copy of receipt, Bill of Sale, Check, or Other Proof of Transaction*

2. State why you do not have a title.

\_\_\_\_\_  
\_\_\_\_\_

3. State the efforts that were taken to notify those who may have an interest in the vehicle.

\_\_\_\_\_  
\_\_\_\_\_

4. How much was the purchase price of the vehicle? \_\_\_\_\_

5. Did you submit a Records Request through the Ohio Bureau of Motor Vehicles? \_\_\_\_\_

*(Attach a copy of the results)*

\_\_\_\_\_  
(Petitioner's) signature

\_\_\_\_\_  
Date