

CERTIFICATION OF AUTHORITY TO TRANSFER VIRGINIA TITLE

Purpose: Use this form to document the authority of a deceased vehicle owner's heir to transfer ownership of a vehicle titled in Virginia;

- when there has not been nor is there expected to be - a qualification on the estate, and
- an executor or administrator of the estate has NOT been appointed.

Instructions: Refer to information on page 2 to determine when to complete and file this form and for further instructions regarding what information is required.

Section 1: VEHICLE INFORMATION			
Note: Do not use this form if the vehicle is titled outside Virginia (see instructions on the back of the form).			
VEHICLE IDENTIFICATION NUMBER (VIN)	MAKE	MODEL	YEAR

Section 2: VEHICLE OWNER (DECEDENT) INFORMATION	
NAME	DATE OF DEATH (mm/dd/yyyy)
RESIDENCE ADDRESS AT TIME OF DEATH	

Section 3: HEIR CERTIFICATION		
I certify that:		
1. The above named Vehicle Owner (decedent) is deceased; 2. I am an heir of the decedent's estate; 3. There has not been and there is not expected to be a qualification on the estate of the decedent; 4. (a) The decedent's debts have been paid or the proceeds from the sale of the above described motor vehicle will be applied against the debts of the decedent; or (b) The above described motor vehicle is property included in a claim for family allowance, exempt property or homestead allowance of the estate (attested copy of claim filed with the court must be attached); and 5. The following are the names of all other persons having an interest in the above described motor vehicle:		
1. FULL LEGAL NAME (print)	4. FULL LEGAL NAME (print)	
2. FULL LEGAL NAME (print)	5. FULL LEGAL NAME (print)	
3. FULL LEGAL NAME (print)	6. FULL LEGAL NAME (print)	
I also certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.		
HEIR NAME (print)	HEIR SIGNATURE	DATE (mm/dd/yyyy)

Section 4 CONSENT TO TRANSFER TITLE SIGNATURES	
I/We, being the person(s) listed above as having a legal interest in the motor vehicle described on this form who are of legal age, hereby consent to the transfer of title of the motor vehicle by the above named heir.	
1. SIGNATURE	4. SIGNATURE
2. SIGNATURE	5. SIGNATURE
3. SIGNATURE	6. SIGNATURE

INSTRUCTIONS**DO NOT USE THIS FORM IF:**

- an executor or administrator has been appointed for the deceased person's estate,
- the vehicle is an out-of-state vehicle - the vehicle title must be transferred according to the laws of the state in which the vehicle was titled, or
- there has been a qualification on the estate.

The person submitting this form should:

1. Complete Sections 1 and 2.
2. Complete Section 3:
 - Print names of all other person(s) who have an interest in the vehicle.
 - Sign heir certification.
3. Complete Section 4 by securing the signature of those persons identified in Section 3 who are of legal age.
4. Submit the completed form (and any other documentation necessary to transfer vehicle ownership) to any Department of Motor Vehicles (DMV) Customer Service Center, any DMV Select or mail to DMV at the address shown on the front of this form.

ADDITIONAL INFORMATION**THE DECEDENT LEFT A WILL**

Each person named in the will (legatee) who has an interest in the vehicle identified in this form must be named in Section 3, and, if of legal age, must sign in Section 4.

THE DECEDENT DIED WITHOUT A WILL (INTESTATE)

If there is a surviving spouse, only the surviving spouse must complete and submit this form unless there are any children (or their descendants) of someone other than the surviving spouse, in which case the spouse and children/descendants must be identified in Section 3 and, if of legal age, must sign their consent in Section 4.

If there is a surviving spouse and the vehicle is included in a claim for family allowance, exempt property or homestead allowance of the estate, only the surviving spouse must complete and submit this form.

If there is no surviving spouse, all persons with an interest in the vehicle must be identified in Section 3 and, if of legal age, must sign their consent in Section 4.

Note: The individual who completes this form should not be included in the list of "other persons having an interest in the vehicle" and should only sign the certification in Section 3.

APPLICATION FOR REPLACEMENT AND SUBSTITUTE TITLES

Purpose: Use this form to apply for a replacement title certificate or substitute title certificate.

Instructions: Complete sections 1 - 3. Complete section 4 to request a replacement title certificate or section 5 to request a substitute title certificate. Submit completed form to any DMV customer service center with the appropriate fees. You may also mail the form and fees to the Titling Work Center at the address above.

1. OWNER INFORMATION			
OWNER FULL LEGAL NAME (last, first, middle, suffix)		TELEPHONE NUMBER ()	DMV CUSTOMER NUMBER / FEIN / SSN
CO-OWNER FULL LEGAL NAME (last, first, middle, suffix)		TELEPHONE NUMBER ()	DMV CUSTOMER NUMBER / FEIN / SSN
MAILING ADDRESS		CITY OR TOWN	STATE ZIP CODE
Are any of the vehicle owners on active military duty or service? <input type="checkbox"/> YES <input type="checkbox"/> NO			

2. VEHICLE INFORMATION				
VEHICLE IDENTIFICATION NUMBER (VIN)		TITLE NUMBER	PLATE NUMBER	PLATE TYPE
YEAR	MAKE	MODEL	BODY TYPE	WEIGHT

3. CURRENT LIEN INFORMATION				
Check One: <input type="checkbox"/> Printed original title certificate attached <input type="checkbox"/> Original title certificate is electronic title (no paper title attached)				
FIRST LIEN	LIENHOLDER NAME		LIENHOLDER CODE	LIEN DATE (mm/dd/yyyy)
	LIENHOLDER MAILING ADDRESS		CITY OR TOWN	STATE ZIP CODE
SECOND LIEN	LIENHOLDER NAME		LIENHOLDER CODE	LIEN DATE (mm/dd/yyyy)
	LIENHOLDER MAILING ADDRESS		CITY OR TOWN	STATE ZIP CODE

Outstanding Lien Information (check one):

OUTSTANDING LIEN: The title certificate will be mailed to the lienholder if a recorded lien has not been satisfied. For evidence of lien satisfaction, the lienholder must indicate on the face of the title that the lien has been satisfied. The lienholder must sign the lien satisfaction. The title should then be forwarded to the owner. An original of a signed lien satisfaction on a lending institution's letterhead or from an individual lienholder is sufficient evidence of lien satisfaction.

NO OUTSTANDING LIEN: The title certificate will be given to the owner or authorized representative (if they can provide proof of identification). If authorizing a representative to receive the title, owner must complete the Authorized Representative information in section 4.

4. REPLACEMENT TITLE CERTIFICATE	
Sign and date one of the three sections to request a replacement title certificate due to the most recent title certificate being either (1) lost, (2) mutilated, or (3) illegible. A lienholder may apply for a replacement title without obtaining the owner(s) signature(s).	
1. Lost Title	
I/we certify that the most recent title is lost and request a replacement title. I/we hereby make application for a title certificate for the vehicle described herein and for that purpose certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/we make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.	
OWNER/AUTHORIZED REPRESENTATIVE SIGNATURE	DATE (mm/dd/yyyy)
CO-OWNER SIGNATURE	DATE (mm/dd/yyyy)
LIENHOLDER SIGNATURE	DATE (mm/dd/yyyy)

LOG NUMBER

TITLE NUMBER

2. Mutilated Title (attach mutilated title)

I/we certify that the most recent title is mutilated and request a replacement title. I/we hereby make application for a title certificate for the vehicle described herein and for that purpose certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/we make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER/AUTHORIZED REPRESENTATIVE SIGNATURE	DATE (mm/dd/yyyy)
CO-OWNER SIGNATURE	DATE (mm/dd/yyyy)
LIENHOLDER SIGNATURE	DATE (mm/dd/yyyy)

3. Illegible Title (attach illegible title)

I/we certify that the most recent title is illegible and request a replacement title. I/we hereby make application for a title certificate for the vehicle described herein and for that purpose certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/we make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER/AUTHORIZED REPRESENTATIVE SIGNATURE	DATE (mm/dd/yyyy)
CO-OWNER SIGNATURE	DATE (mm/dd/yyyy)
LIENHOLDER SIGNATURE	DATE (mm/dd/yyyy)

5. SUBSTITUTE TITLE CERTIFICATE

Complete this section only when information on the previously issued certificate of title changes. Check applicable box(es):

- | | |
|--|--|
| <input type="checkbox"/> Legal name change | <input type="checkbox"/> Name change due to the death of the co-owner |
| <input type="checkbox"/> Address change and request new title be issued | <input type="checkbox"/> Add, remove, or change designated beneficiary (multiple owners/no lien - complete VSA 18) |
| <input type="checkbox"/> Request a clear title after liens have been satisfied | <input type="checkbox"/> Change the vehicle identification number (VIN) or assign a new VIN |
| <input type="checkbox"/> Change the name of the lienholder | <input type="checkbox"/> Change the name(s) of trustee(s) for a trust |
| <input type="checkbox"/> Other (explain) | |

NAME(S) OF DOCUMENT(S) SUBMITTED TO SUPPORT CHANGE:

I/we hereby make application for a substitute title certificate for the vehicle described herein and for that purpose certify and affirm that all information presented in this form is true and correct, that any documents I/we have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I/we make this certification and affirmation under penalty of perjury and I/we understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER/AUTHORIZED REPRESENTATIVE SIGNATURE	DATE (mm/dd/yyyy)
CO-OWNER SIGNATURE	DATE (mm/dd/yyyy)
LIENHOLDER SIGNATURE	DATE (mm/dd/yyyy)

6. AUTHORIZED REPRESENTATIVE DESIGNATION

- The owner has an authorized representative submitting the completed VSA-67. In order for the authorized representative to receive the replacement/substitute title certificate, the owner must enter the name of the authorized representative and sign below. The authorized representative accepting the replacement/substitute title certificate for the owner must present proof of identification. If the authorized representative cannot provide proof of identification, the replacement/substitute title certificate will be mailed to the vehicle owner.

As the vehicle owner, I authorize the individual listed below to receive the replacement title certificate.

AUTHORIZED REPRESENTATIVE NAME	VEHICLE OWNER SIGNATURE	DATE (mm/dd/yyyy)
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PRIVACY ACT NOTICE

The information, including Social Security Number, is requested in accordance with VA Code § 46.2-623. Any person who refuses to supply the required information will be denied a Certificate of Title and/or registration. Title and registration records may be disseminated in accordance with VA Code §§ 46.2-208 through 46.2-214, to business, law enforcement, or authorized government entities.

FOR DMV USE ONLY

Title Released To	Date (mm/dd/yyyy)
PROOF OF IDENTIFICATION PRESENTED (specify)	
ID Document Type (specify)	ID Document Number