CAR Bill of Sale Template

**For the Exact Sales Amount indicated below, I the Seller, do hereby sell and transfer ownership of the Vehicle described below to the Buyer, acknowledge full receipt of payment, certify that I have the authority to sell it, warrant the Vehicle to be free of any liens or encumbrances, and certify that all information given is true and correct to the best of my knowledge**.

## Vehicle Information:

|  |  |  |
| --- | --- | --- |
| VEHICLE IDENTIFICATION NUMBER (VIN#) | ENGINE NUMBER (if applicable) | LICENSE PLATE # |
| YEAR | MAKE | MODEL | BODY STYLE (2 Dr, 4 Dr, etc) |
| ODOMETER READING (**Miles**) | SALE DATE | EXACT SALES AMOUNT |

## Conditions and Warranty:

The Seller has no knowledge of any hidden defects in and to the Vehicle, and believes to the best of the Seller's knowledge that the Vehicle is being sold in good operating condition "AS-IS," meaning that there is no warranty for any defects and that all repairs are the responsibility of the Buyer.

Seller allows the Buyer \_\_\_\_\_\_ days to have the Vehicle inspected by an independent mechanic, and agrees to cancel the sale if the inspection is unsatisfactory to the Buyer.

## Odometer Discloser Statement:

I the Seller, hereby certify to the best of my knowledge that the ODOMETER READING listed under the Vehicle information above was not altered, set back, or disconnected while in the Seller's possession, and the Seller has no knowledge of anyone doing so, and is (check one of the following):

1. **THE ACTUAL MILEAGE**
2. **MILEAGE IN EXCESS OF MECHANICAL LIMITS**
3. **NOT THE ACTUAL MILEAGE. WARNING! ODOMETER DISCREPANCY**

|  |  |  |
| --- | --- | --- |
| **SELLER'S SIGNATURE****x**  | **SELLER'S PRINTED NAME** | **DATE** |
| **SELLER'S ADDRESS** | **CITY** | **STATE** | **ZIP** |

|  |  |  |
| --- | --- | --- |
| **BUYER'S SIGNATURE****x**  | **BUYER'S PRINTED NAME** | **DATE** |
| **BUYER'S ADDRESS** | **CITY** | **STATE** | **ZIP** |

**SWORN TO AND SUBSCRIBED BEFORE ME, this the \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_.**

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **NOTARY PUBLIC**