## MOTOR VEHICLE OWNERSHIP AFFIDAVIT H-115 Rev. 10-2014

## STATE OF CONNECTICUT DEPARTMENT OF MOTOR VEHICLES



## TITLE UNIT

STATEMENT	FULL NAME(S) (First, Middle Initial, Last)						
OF IDENTITY	RESIDENT ADDRESS	(Number and Street)	(City	or Town)	(State)	(Zip Code)	
VEHICLE DESCRIPTION	YEAR	MAKE			MODEL		
	VEHICLE IDENTIFICATION N	NUMBER (VIN)					
OWNERSHIP STATUS		SION AND OWNERSHIP OF THE ABOV				eller, or transferor)	
	TO THE BEST OF YOUR KNOWLEDGE, ARE THERE ANY LIENS OR ENCUMBRANCES ON THE ABOVE DESCRIBED VEHICLE?						
LIEN STATUS							
OATH AND ACKNOWLEDG- MENT	AND CKNOWLEDG- (or parties) who has (have) a legal interest in the above described vehicle. I understand that if I make a statement w						