

TENNESSEE DEPARTMENT OF REVENUE
General Affidavit

PURPOSE: An individual may use this affidavit for purposes of writing a statement of facts which is sworn to be true.

INSTRUCTIONS: Please complete form accordingly.

A. AFFIANT INFORMATION:

Name: _____ Phone: _____
Street Address: _____ City: _____ State: _____ Zip: _____

B. VEHICLE INFORMATION:

Vehicle Identification Number (VIN): _____ Year: _____
Make: _____ Model: _____ Color: _____

C. STATEMENT OF FACTS (place an "X" by the proper fact):

___ **No-Use:** the motor vehicle described in this document has not been operated on the roads or highways of Tennessee.

___ **One in the Same Name:** the two different names found on different documents refer to one person.

___ **Correction:** an error was made in the title application paperwork. Please explain the error in the spaces provided below.

___ **Other/Further Details:**

D. ACKNOWLEDGEMENT:

AFFIANT CERTIFICATION STATEMENT: I, the undersigned affiant hereby certify that the statements made herein are true and correct to the best of my knowledge, information, and belief. Fraudulent statements made in this application could result in denial of this request and subject the signatory to criminal and civil penalties.

Affiant's Signature: _____ **Date:** _____