

Georgia Department of Revenue - Motor Vehicle Division Affidavit of Repossession



ANY CORRECTION OR ALTERATION WILL VOID THIS AFFIDAVIT

Purpose of this Affidavit: This affidavit is to be used by a repossessor to certify that a motor vehicle has been repossessed because of the vehicle owner(s) failure to meet his/her obligation for settlement of a lien or security interest on said vehicle.

How to submit this Affidavit: This affidavit must be completed in its entirety, legibly printed or typed, and submitted along with all required document(s) to the county tag office in the county where you reside. Please refer to http://dor.georgia.gov to locate the county tag office in your county of residence.

Required document(s): Current Georgia title

ee: \$18.00 Title Fee,	any penalty fee ar	nd Title Ad Valorem Tax	(TAVT), if applicable.		
A OWNER INFOR	MATION				Suffix
Primary Owner's Full Legal Name:	First Name		Middle Initial	Last Name	sin operation
Apt./Suite No. Street No. Street Name Apt./Suite No.					
City:	arch anglades to	State:	ZIP Code:	Telephone No.:	Baller of the first of the second
Secondary Owner's Full Legal Name:	First Name		Middle Initial	Last Name	Suffix
Mailing Address:	Street No. Stree	et Name			Apt./Suite No.
City:		State:	ZIP Code:	Telephone No.:	1 - CH - 123 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
B LIENHOLDER	OR SECURITY IN	ITEREST HOLDER INFO	DRMATION		
Lienholder's or Sec Interest Holder's Na				Date of Reposs	
Mailing Address:	Street No. Street	et Name		nto de la	Apt./Suite No.
City:		State:	ZIP Code:	Telephone No.:	
C VEHICLE INFORMATION					
Vehicle Identification	on No. (VIN):	rotor (Star 2 HT) But			
Year:	Make:			Model:	
Current Title No.:					
D CERTIFICATIO					
I hereby certify that the recorded against this they have in the veh	s vehicle on the re	own on this affidavit is co ecords of the Georgia De	omplete and correct. I also co partment of Revenue, Motor	ertify that all holders of unsatisfied Vehicle Division, have been duly r	liens and/or security interests notified to protect any interests
Authorized Agent's Name:		ritike genamand se keste	ge V* - D./ SIV (V) peter i	Position/Job Title:	History of the state of the sta
Authorized Agent's Signature	e:			1 1	Date: / /
some strengt sport settlement og til et strengt settlement og til et stren	LIC ACKNOWLE	DGMENT			
Sworn to and subs			ay of Month	, Year	Notary Seal or Stamp
Notary Public's Full Legal Name:					
Physical Address:					
Email Address: Telephone No.:					
Signature of Notary Public:			Commission	on Expires: / /	

Have a question? Visit our website at http://dor.georgia.gov/motor-vehicles or scan the QR code above for more information.