A Department of	Application for Title of Vehicle by	se Only
Vehicle Services Bureau	Non-Probate Transfer	n dww

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431 Phone (406) 444-3661 Fax (406) 444-0116 • mvdtitleinfo@mt.gov

This form is used when no executor or administrator is appointed, provided the value of the decedent's entire estate – including the vehicle that is the subject of the application, less liens and encumbrances – does not exceed \$100,000 (§ 72-3-1101, MCA).

For purposes of this document, a "vehicle" includes a motor vehicle, trailer, semi-trailer, pole trailer, camper, motorboat, personal watercraft, sailboat, and snowmobile.

The appropriate title fee must be submitted with this application: 12.36 for light vehicles, trucks, and buses weighing less than one ton; 10.30 for all other vehicles (fees include 3% administration fee per 5.61-3-111, MCA).

Legal Name		DL/FEIN/Tribal ID/Corp ID*
Residential address		
Mailing address	City	State Zip code
Mailing address	City	State Zip Code
Email Address	Dhana Numha	•
		er
certify that		
Name of Vehicle Owner		
who died on at		
who died on at	City County	State Zip Code
and		
Name of Vehicle Co-owner		
who died on at		
	City County	State Zip Code
is the registered owner of the following vehicle		
ear Make/Manufacturer	Model	Body Style/Length Ton
lentification Number	Title Nun	ıber
lease read and check one box below		
1. I am applying for a title and I do not i be cancelled with the processing of t	end to drive the vehicle. I understand registration and license	e plates currently assigned to the vehicle wil
2. I am applying for title, registration, ar	license plates with the intent of driving the vehicle. By choos plicable registration fees through the county treasurer's office	
her certify that:		
	tration, and no letter of administration or letters testam	entary have been issued to any
	yone other than myself, or in the absence of a will, I a	m the person entitled to the property by
1 · · · · · · · · · · · · · · · · · · ·	erever located, less liens and encumbrances, does no	ot exceed \$100,000;
As (state relationship)	of the deceased, my right to this property is supe	
the deceased.		
	nents made and information contained on this form are ing for a business entity or trust, I have full authority to	
nted Name		
jnature		DL/FEIN/Tribal ID/Corp ID*
This is my legal signature		Date

*DL=Driver License number; FEIN=Federal Employer Identification Number; Tribal ID=Tribal Identification; Corp ID=Corporate Identification number *Montana county and state authorities reserve the right to reject any form that has been altered.* This form is available in alternate formats for people with disabilities.

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