Department of Public Safety Bureau of Motor Vehicles Caller Box 10007 Saipan, MP 96950 (670) 664-9066 / 67 / 68 / 69



CERTIFICATION

I,	, certify that I am the legal owner of this					
		/		/		
Year, Make and	Model of	Vehicle / Vehicle I.D. N	umber / Lice	nse Plate #, if any.		
I am entitled	to transfe	er ownership of this	vehicle an	d that its odometer	reading is:	
		miles and, to the bes	st of my kno	wledge, reflects the ac	tual mileage	
of the vehicle de	escribed h	erin, unless one of the	following is	checked:		
1.	The amount of mileage stated is in excess of 99,999 miles.					
2.		The mileage stated is not the actual miles.				
3.		The vehicle is a truck with a gross weight rating of 16,000 pounds or more.				
Stated under the	penalty o	f perjury laws of the Co	ommonweal	h of the Northern Mari	iana Islands	
signed this	_ day of		, 200	_ in	,	
Northern Maria	na Islands	•				
				Signature		
Subscribed and S	Sworn to l	pefore me this da	ay of	, 200		
				Notary Public	c	