

COMMONWEALTH OF PENNSYLVANIA

CERTIFICATE OF TITLE FOR A VEHICLE

FUEL TYPE: GASOLINE

VEHICLE IDENTIFICATION NUMBER		YEAR	MAKE OF VEHICLE	TITLE NUMBER
BODY TYPE	DUP	SEAT CAP	PRIOR TITLE STATE	ODOM. FLOOD DATE
DATE PA TITLED	DATE OF ISSUE	UNLADEN WEIGHT	GVWR	GOWR
				TITLE BRANDS

VOID

REGISTRATION NOT TO BE RECALLED TAX UNPAID

REGISTERED OWNER(S)
CAR CONNECTION INC
 2757 W STATE ST
 NEW CASTLE PA 16101

Department of Transportation

- ODOMETER STATUS**

1 = ACTUAL MILEAGE
 2 = MILEAGE EXCEEDS THE MECHANICAL LIMITS
 3 = NOT THE ACTUAL MILEAGE
 4 = NOT THE ACTUAL MILEAGE-ODOMETER TAMPERING VERIFIED
 5 = EXEMPT FROM ODOMETER DISCLOSURE

TITLE BRANDS

A = ANTIQUE VEHICLE
 C = CLASSIC VEHICLE
 D = COLLECTIBLE VEHICLE
 F = OUT OF COUNTRY
 G = ORIGINALLY MFGD. FOR NON-U.S. DISTRIBUTION
 H = AGRICULTURAL VEHICLE
 L = LOGGING VEHICLE
 P = IS WAS A POLICE VEHICLE
 R = RECONSTRUCTED
 S = STREET ROD
 T = RECOVERED THEFT VEHICLE
 V = VEHICLE CONTAINS REISSUED VIN
 W = FLOOD VEHICLE
 X = IS WAS A TAXI

FIRST LIEN FAVOR OF: _____ SECOND LIEN FAVOR OF: _____

IF A SECOND LIENHOLDER IS LISTED UPON SATISFACTION OF THE FIRST LIEN, THE FIRST LIENHOLDER MUST FORWARD THIS TITLE TO THE BUREAU OF MOTOR VEHICLES WITH THE APPROPRIATE FORM AND FEE.

FIRST LIEN RELEASED: _____ DATE: _____

BY: _____ AUTHORIZED REPRESENTATIVE

MAILING ADDRESS: _____

SECOND LIEN RELEASED: _____ DATE: _____

BY: _____ AUTHORIZED REPRESENTATIVE

MAILING ADDRESS: _____

000000
 CAR CONNECTION INC
 2757 W STATE ST
 NEW CASTLE PA 16101



I certify as of the date of issue, the official records of the Pennsylvania Department of Transportation reflect that the person(s) or company named herein is the lawful owner of the said vehicle.

LESLIE S. RICHARDS
Secretary of Transportation

D. APPLICATION FOR TITLE AND LIEN INFORMATION-

TO BE COMPLETED BY PURCHASER WHEN VEHICLE IS SOLD AND THE APPROPRIATE SECTIONS ON THE REVERSE SIDE OF THIS DOCUMENT ARE COMPLETED.

SUBSCRIBED AND SWORN TO BEFORE ME: _____ MO. _____ DAY _____ YEAR _____ SIGNATURE OF PERSON ADMINISTERING OATH: _____ IN PRESENCE OF: _____ SIGNATURE OF APPLICANT OR AUTHORIZED SIGNER: _____ SIGNATURE OF CO-APPLICANT/TITLE OF AUTHORIZED SIGNER: _____	If a co-purchaser other than your spouse is listed and you want the title to be listed as "Joint Tenants With Right of Survivorship" (On death of one owner, title goes to surviving owner) CHECK HERE <input type="checkbox"/> . Otherwise, the title will be issued as "Tenants in Common" (On death of one owner, interest of deceased owner goes to his/her heirs or estate). IF NO LIEN, CHECK <input type="checkbox"/> IS THIS AN ELT? (IF YES, FIN REQUIRED) YES <input type="checkbox"/> NO <input type="checkbox"/> 1ST LIENHOLDER FINANCIAL INSTITUTION NUMBER: _____ 1ST LIENHOLDER NAME: _____ STREET: _____ CITY: _____ STATE: _____ ZIP: _____ IF NO 2ND LIEN, CHECK <input type="checkbox"/> IS THIS AN ELT? (IF YES, FIN REQUIRED) YES <input type="checkbox"/> NO <input type="checkbox"/> 2ND LIENHOLDER FINANCIAL INSTITUTION NUMBER: _____ 2ND LIENHOLDER NAME: _____ STREET: _____ CITY: _____ STATE: _____ ZIP: _____
--	---

DO NOT ACCEPT DOCUMENT WITHOUT VERIFYING THE PRESENCE OF THE LIBERTY BELL WATERMARK

61343300

STORE IN A SAFE PLACE - IF LOST APPLY FOR A DUPLICATE - ANY ALTERATION OR ERASURE VOIDS THIS TITLE