

Small Estate Affidavit

| | | | |
|--------------------------------------|------|-----------------------------|--|
| Vehicle Identification Number | | Title Number | |
| Year | Make | Model | |
| Name of Deceased | | Resident County of Decedent | |
| County and State Where Decedent Died | | Date of Death | |

Under penalty of perjury, the undersigned claimant, being first duly sworn, hereby deposes and says:

1. I am over the age of eighteen (18) years, and qualify as a witness in the State of _____
2. I am the successor of the decedent's estate.
3. The fair market value of the entire estate of the decedent, wherever located, which is subject to probate, less liens and encumbrances, does not exceed one hundred thousand dollars (\$100,000).
4. More than thirty (30) days has elapsed since the death of the decedent.
5. No application or petition for the appointment of a personal representative or for summary administration is pending or has been granted in any jurisdiction.
6. I am entitled to payment or delivery of the property of the decedent.

This affidavit is attached to and made part of the application for _____ Certificate of Title to the above described vehicle. The claimant hereby agrees to warrant and defend said Title and to save harmless and defend regardless of outcome the Transportation Department of the State of _____ from the expenses of and against all suits, actions, claims, losses, or assertion of claims including costs, expenses, and attorney fees to which the department may be subjected on account of any defect in the Title to the vehicle in question.

I certify under penalty of perjury pursuant to the law of the State of _____ that the foregoing is true and correct and the signature below is my true and legal signature.

| | | | | | |
|---------------------------|--|--------------------------|--|--------------------------------|----------|
| Claimant's Printed Name | | Relationship to Deceased | | Daytime Phone Number () | |
| Address | | City | | State | Zip Code |
| Claimant's Signature X | | | | Date | |