



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

STATEMENT OF ERROR OR ERASURE OF A NAME

**THIS FORM CAN ONLY BE USED FOR NAME CORRECTIONS
WHEN APPLYING FOR TITLE.**

COMPLETE ALL SECTIONS AS FOLLOWS:

1. Vehicle plate and identification number.
2. Check the applicable box.
3. Describe the error or erasure.
4. Show how the entry should read.
 - Be sure to draw one line through the error and write in the correct name on the document.
5. Printed name and signature of either:
 - Person or business who made the error or whose name appears in error, **or**
 - Person whose signature appears in error.

SECTION 1	PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER
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SECTION 2	<p>The name appearing on, or erased from, the:</p> <p><input type="checkbox"/> Title Application</p> <p><input type="checkbox"/> Title</p> <p><input type="checkbox"/> Manufacturer's Certificate of Origin</p> <p>was in error and has no bearing on the ownership of the vehicle described above. The name should not be a part of the ownership record.</p>
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SECTION 3	<p>Describe the error or erasure:</p>
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SECTION 4	<p>The entry should properly read as follows (if no entry write "blank"):</p>
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I understand it is a crime, under ORS 803.075, to certify the truth of a statement when I know the statement is not true. Such a crime is a Class A misdemeanor punishable by a jail sentence of up to one year, a fine of \$6,250, or both.

SECTION 5	PRINTED NAME	TITLE
	SIGNATURE X	DATE