



South Carolina Department of Motor Vehicles

AFFIDAVIT OF RESPONSIBILITY

MV-103
(Rev. 7/03)

Acceptance of this form does not waive any other requirements for documentation by the Department of Motor Vehicles.

I, _____,

Street City State Zip Code

am the buyer/owner of the following motor vehicle: MAKE _____ MODEL _____
YEAR _____ VEHICLE IDENTIFICATION NUMBER _____

I/we have exhausted all remedies in an attempt to obtain the previously issued title for the above described motor vehicle.

To my knowledge, there are no outstanding liens on the vehicle except those listed on the Department of Motor Vehicle's application for certification of title/registration (Form 400.)

By my signature below, I accept full responsibility if any other liens or other encumbrances exist against the above described vehicle.

Signature of Applicant Date

Signature of DMV Specialist Date

Hand Print Name of Applicant

Job Title