

STATEMENT OF FACT

(FOR USE ONLY WHEN THE LIEN IS OVER TEN YEARS OLD) (THIS IS NOT A RELEASE OF LIEN)

YEAR:	
MAKE:	
BODY STYLE:	
VIN:	
YEAR: MAKE: BODY STYLE: VIN: THE LIEN DESCRIBED BELOW HAS BEEN PAID IN FULL. LEIN DATE: LIENHOLDER NAME: ADDRESS: THIS COMPANY IS NO LONGER IN BUSINESS AND THE LIED DATE IS OVER 10 YEARS OLD. (SIGNATURE) (PRINTED NAME)	
LEINI DATE:	
LEIN DATE.	
LIENHOLDER NAME:	
ADDRESS:	
(SIGNATURE)	(PRINTED NAME)
(SIGNATURE)	(PRINTED NAME)
	(DATE)

WARNING! TRANSPORTATION CODE §501.155 PROVIDES THAT FALSIFYING INFORMATION ON ANY REQUIRED STATEMENT OR APPLICATION IS A THIRD DEGREE FELONY