DMV-185-TR REV 11/14

West Virginia Department of Transportation

Division of Motor Vehicles

Legal Heir Affidavit

West Virginia dmv
Keeping West Virginia on the move.

1-800-642-9066
www.dmv.wv.gov

A COPY OF THE DEATH CERTIFICATE MUST ACCOMPANY THIS DOCUMENT.
This form is only to be completed when no administrator or administratrix has been appointed and no will has been left by the decedent. License plates are transferable from the decedent to legal heirs, however a valid certificate of insurance in the new owner's name is required to register the motor vehicle.

Decedent and Motor Vehicle Information

Name of Decedent _____

Motor Vehicle Title Number ☐☐☐☐☐☐☐ *Serial/VIN Number* ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Affiant Information & Certification

Name of Affiant _____ *Name of Affiant* _____

Address of Affiant _____ *Address of Affiant* _____

City, State and Zip code _____ *City, State and Zip code* _____

Signature of Affiant **(X)** _____ *Signature of Affiant* **(X)** _____

I/we, being dually sworn on oath or affirmation, do swear or affirm that I/we am/are the legal heir(s) of the decedent described herein, as the legally registered owner of the aforementioned motor vehicle, and that I/we have been designated as new owner(s) and assignee(s) pursuant to statutory descent and distribution and by agreement of all other legal heirs.

Signature of Affiant **(X)** _____ *Signature of Affiant* **(X)** _____

Additional Heir(s) Must Complete the Following *(For more than two (2) heirs, additional DMV-185-TR form(s) must be completed)*

I/we, the undersigned, being duly sworn on oath or affirmation, do hereby acknowledge that I/we have freely and knowingly relinquished to the above named affiant(s) all rights and claims to the vehicle described above.

Name of Heir _____ *Name of Heir* _____

Address of Heir _____ *Address of Heir* _____

City, State and Zip code _____ *City, State and Zip code* _____

Signature of Heir **(X)** _____ *Signature of Heir* **(X)** _____

Certification of Notary Public

State of West Virginia, County of _____

Subscribed and sworn before me this _____ day of

_____, 20_____.

(X) _____
NOTARY PUBLIC SIGNATURE

My Commission expires _____/_____/_____.

NOTARY STAMP

**** ANY ALTERATIONS, ERASURES, OR WHITEOUTS WILL VOID THIS DOCUMENT.***