WASHINGTON STATE DEPARTMENT OF LICENSING

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Affidavit of Inheritance/Litigation

License plate/Registration number	Year	Make	Series/Body style

Vehicle Identification Number (VIN) OR Vessel Hull Identification Number (HIN)

Inheritance

This affidavit is used when no executor or administrator is appointed for the deceased.

I certify that _____ (Name of deceased), the registered owner of this vehicle/vessel, died on the _____ (Day) day of _____ (Month), _____ (Year).

The deceased left no estate necessitating administration, and no letters of administration or letters testamentary have been issued to any persons. The vehicle/vessel has not been bequeathed by will to anyone other than the person signing below who is _____ (Relationship to deceased) of the deceased. No relative who would have prior right, except _____ (Person who would have prior right) survives the deceased, and provision has been made for payment of debts of the deceased. Signature must be notarized or certified below.

_____ (Printed name) X _____ (Signature) _____ (Date)

County clerk certificate for transfer of vehicle/vessel in litigation

This certificate, properly completed, will serve instead of all other court papers.

I certify that in the superior court of the State of Washington for the County of _____:

1. For orders of the court transferring title (including divorce and probate):

   An order transferring title to this vehicle/vessel to: _____ (Transferee)

   at _____ (Transferee's address) was duly entered in _____ (Title of case)

   _____ (Name of administrator (if in probate)) _____ (Docket number of case)

   on the _____ (Day) day of _____ (Month), _____ (Year).

2. For those cases in which the estate executor or administrator transfers title:

   _____ (Name of executor / Administrator) was duly appointed under the nonintervention will of _____ (Name of deceased) and is qualified to act as such, and that a decree of solvency has been entered.

X _____ (Executor / Administrator signature) _____ (Date)

X _____ (County Clerk signature) _____ (Date)

Notarization/Certification

State of _____, County of _____

Signed or attested before me on _____ by _____

(Seal or stamp)

_____ (Signature)

_____ (Printed or stamped name)

_____ (Title) and _____ (Dealer or county/office number or notary expiration date)

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If you need accommodation, please call (360) 902-3600 or TTY (360) 664-0116.