



ALABAMA DEPARTMENT OF REVENUE
MOTOR VEHICLE DIVISION
TITLE SECTION

MVT 41-5
5/18

P.O. BOX 327640 • Montgomery, AL 36132-7640

TYPE OR
PRINT ONLY

Affidavit of Acquisition and Disposition of a
Non-Total Loss Vehicle by Insurance Company

TYPE OR
PRINT ONLY

This Affidavit Must Be Submitted As A Supporting Document When Applying For A Certificate Of Title For A Non-Total Loss Vehicle Acquired By An Insurance Company In Settlement Of An Insurance Claim.

**THIS FORM MAY BE DUPLICATED OR ADDITIONAL COPIES MAY BE OBTAINED FROM THE DEPARTMENT WEB SITE AT
www.revenue.alabama.gov**

NAME (TITLE OWNER)					
ADDRESS			CITY	STATE	ZIP
VEHICLE IDENTIFICATION NUMBER		TITLE NUMBER AND STATE		TAG NUMBER AND STATE	
YEAR	MAKE	MODEL	BODY TYPE	COLOR	ODOMETER READING
DATE OF LOSS			CLAIM NUMBER		

INSURANCE COMPANY			
NAME OF INSURANCE COMPANY			
ADDRESS			
CITY	STATE	ZIP	

ADJUSTING COMPANY (If Applicable)			
NAME OF COMPANY			
ADDRESS			
CITY	STATE	ZIP	

This is to certify that the insurance company listed above has acquired ownership of the vehicle described above due to an insurance settlement with the titled owner. This said vehicle was sold or re-assigned to:

NAME OF PURCHASER			DATE OF SALE		
ADDRESS		CITY	STATE	ZIP	
LIENHOLDER (IF ANY)					
ADDRESS		CITY	STATE	ZIP	

Sworn to and subscribed before me

Signed by:

this _____ day of _____, _____ YEAR.

AUTHORIZED REPRESENTATIVE OF INSURANCE COMPANY

SIGNATURE OF NOTARY

My commission expires _____.