## Louisiana Snowmobile Bill of Sale Form

Date of Sale:	(mm/dd/yyyy)	
PARTIES:		
Seller Information:	Buyer Information:	
Full Name:	Full Name:	
Address:	Address:	
City/State/ZIP:	City/State/ZIP:	
Phone Number:	Phone Number:	
Email:	Email:	
<ul> <li>Make:</li> <li>Model:</li> <li>Year:</li> <li>Color:</li> <li>Vehicle Identification Number (VIN):</li> </ul>		
Odometer Reading: miles		
Additional Description:		
PURCHASE PRICE & PAYMENT METHOD:		
The Buyer agrees to purchase the snown Dollars (\$), receipt of which is Payment Method: (Check all that apply)		
Pavment Method: (Check all that apply)		

☐ Personal Check
□ Cash
☐ Cashier's Check
☐ Credit Card
☐ Money Order
☐ PayPal
☐ Other:
CONDITION OF SNOWMOBILE:
The condition of the snowmobile is (Check one):
□ NEW
□ EXCELLENT
□ VERY GOOD
□ GOOD
□ FAIR
□ POOR
ODOMETER DISCLOSURE STATEMENT:
The Seller certifies that to the best of their knowledge the snowmobile's odometer
reading now reads miles and reflects the actual
mileage of the snowmobile described above unless one of the following
statements is checked:
The mileage stated is in excess of its mechanical limits.
<ul> <li>The odometer reading is not the actual mileage. WARNING – ODOMETER DISCREPANCY.</li> </ul>
CONDITION OF SALE:
The undersigned Seller certifies that the above-described snowmobile is being

sold "as-is" with no warranties, either express or implied, regarding the condition

of the snowmobile. The Buyer acknowledges that they have inspected the snowmobile and accepts it in its current condition.

## **WARRANTIES:**

The Seller warrants that they are the legal owner of the snowmobile and that it is free from all liens, encumbrances, and other claims.

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SIGNATURES:	
Seller's Signature:	Date:
Printed Name of Seller:	
Buyer's Signature:	Date:
Printed Name of Buyer:	
NOTARIZATION:	
STATE OF LOUISIANA PARISH OF _	
appeared	
and acknowledged it to be their free	ver), who executed the foregoing instrument and voluntary act and deed.
Notary Public:	
My Commission Expires:	
WITNESSES:	
1. Witness Signature:	Date:
Printed Name:	
2. Witness Signature:	Date:
Printed Name:	