

DMV Bill of Sale Form California

Seller Information

Full Name: _____

Address: _____

City: _____

State: _____

ZIP Code: _____

Contact Number: _____

Buyer Information

Full Name: _____

Address: _____

City: _____

State: _____

ZIP Code: _____

Contact Number: _____

Vehicle Details

Make: _____

Model: _____

Year: _____

VIN: _____

License Plate Number: _____

Sale Information

Sale Date: _____

Sale Price: _____

Payment Method: _____

Odometer Reading: _____

Declaration

I, the seller, declare that the information provided is accurate and that I am the legal owner of the vehicle.

Seller Signature: _____

Buyer Signature: _____

Date: _____