



WYOMING AUTOMATIC TRANSFER OF A VEHICLE TITLE UPON DEATH TO BENEFICIARY DESIGNATION FORM

The form shall be recorded in the office of the county clerk in the county where the vehicle is titled. Wyoming State Statute § 31-2-104.1

Vehicle Identification Number*															
Year*				Make*				Model*							
Title Owner: Last, First Name*															
Address*						City*				ST*		Zip*			
Email								Phone Number*							
Additional Title Owner/s (if applicable): Last, First Name															
Email								Phone Number							
DESIGNATION OF TRANSFER ON DEATH TO BENEFICIARY- LEGAL NAME OR LEGAL ENTITY INFORMATION															
Grantee beneficiary designated by the owner upon death of the last surviving owner named above unless this form has been revoked, or ownership was previously transferred, and subject to all liens, transferred on death to:															
Last, First Name or Legal Entity*				DOB*		Phone Number*				Email					
Last, First Name or Legal Entity				DOB		Phone Number				Email					
Last, First Name or Legal Entity				DOB		Phone Number				Email					
I/We do hereby acknowledge under penalty of perjury that I/we are the titled owner of the vehicle. This form will be revoked if there is a name change, or an owner is added to the vehicle title from the original filing of this form.															
_____ Legal Owner Signature				_____ Printed Name				_____ Date							
_____ Legal Owner Signature (if applicable)				_____ Printed Name				_____ Date							
_____ Legal Owner Signature (if applicable)				_____ Printed Name				_____ Date							

The Acknowledgement below must be completed.

Subscribed and sworn to before me by (printed owner name(s)) _____

In the State of _____ County of _____ this _____ day of _____ 20____.

Notary Public

Commission Expiration Date

(seal)

*Required data fields