

## STATEMENT OF TRANSFER OF VEHICLES TO A SURVIVING SPOUSE OR SURVIVING HEIR

Wisconsin Department of Transportation  
www.dot.wisconsin.gov  
s.342.17(4)(b) and s.867.03 Wis. Stats.  
MV2300 12/2007

The transfer shall not affect any prior liens upon the vehicle(s).

Submit this form with the Certificate of Title (form MV2269 or T055) and Application for Title / Registration (form MV1).  
The title transfer fee for **surviving spouses** is \$62.00 for each vehicle.  
The title transfer fee for **surviving heirs** is \$69.50 for each vehicle.

Name of Surviving Spouse or Surviving Heir	
Street Address	
City, State, ZIP Code	
Name of Deceased	Date of Death
Solely-Owned Property Value of Deceased (For Surviving Heir Only)	

VEHICLE	MAKE	IDENTIFICATION OR ENGINE NUMBER	MAXIMUM VALUE	TITLE LOST
1				<input type="checkbox"/> Yes <input type="checkbox"/> No
2				<input type="checkbox"/> Yes <input type="checkbox"/> No
3				<input type="checkbox"/> Yes <input type="checkbox"/> No
4				<input type="checkbox"/> Yes <input type="checkbox"/> No
5				<input type="checkbox"/> Yes <input type="checkbox"/> No

**As Surviving Spouse**

I state that the information given above is correct and that I shall be personally liable for the debts and charges of the deceased, to the extent of the value of the vehicle(s), subject to s.859.25 Wisconsin Statutes.

X  
\_\_\_\_\_  
(Surviving Spouse Signature)

**As an Heir of the Deceased**

I state that the information given above is true and correct and that the deceased has no solely-owned property that exceeds \$50,000 in value according to the requirements of s.867.03 Wisconsin Statutes.

**I have included an additional \$20.00 replacement title fee if the box for "Title Lost – Yes" is checked.**

X  
\_\_\_\_\_  
(Signature of Heir)

X  
\_\_\_\_\_  
(Signature of Heir)