vitu

Cover Sheet - OH

Process Date	Transaction Id
10/15/2026	195276411
Titling State	**Military**
OH	N

JTJVBCDX6T5100164 2026 LEXUS
New Passenger

Vehicle Info

Model: GX 550
Body Type: Sport Utility Vehicle
GVW: 6920
Fuel Type: Gasoline
Odometer Reading: 8

Sale Information

Purchase Date: 10/12/2026
Sale Type: Purchase
Taxable Selling Price: 51,143.00
MSRP:
List Price:
Trade In Value: 37,000.00

Owner Info

Owner 1 Name: SEAN FRAZIER
Owner 2 Name:
Registered Address: 67780 TULANE RD, SAINT CLAIRSVILLE, Belmont, OH, 43950
Lessor Name:
Address:

Lienholder Info

Lienholder 1 Name: USX FEDERAL CREDIT UNION
Address: PO BOX 1728, CRANBERRY TWP, BUTLER, PA, 16066
Lienholder 2 Name:
Address:
Lienholder 3 Name:
Address:

Registration Information

Application Type: Title & Registration
Registration Action: Plate Transfer
Registration Period:
Plate Number: KBH9580
Expiration Date: 04/16/2027

Final Destination

Send to: FRAZIER SEAN
Phone: (740)232-4620
Mailing Address: 67780 TULANE RD, SAINT CLAIRSVILLE, Belmont, OH, 43950

Fee Summary

REGISTRATION FEE	$1.00
DEPUTY FEE	$8.00
TITLE FEE	$18.00
OH STATE TAX (5.75%)	$2,940.72
OH COUNTY TAX (1.5%)	$767.15
VITU FULL SERVICE FEE	$165.00
OH STATE VARIABLE FEES	$10.00
Total	**$3,909.87**

RECEIVED
OCT 16 2026
BY:_____

Submitted By: Wendy Rothermund
Phone: (412)344-5800
Location: Rohrich Lexus
Address: 2540 Washington Road, Canonsburg, Wayne, PA, 15317

For Vitu use

Pre-Checker Name

Comments / Resolution:

For your paperwork to be processed faster, please send your transaction documents in the order they are listed on the checklist. Thank you!

Copyright © 2026 Vitu, Inc. All rights reserved.
PROPRIETARY MATERIAL. This material is proprietary and subject to the terms and conditions contained in Vitu's Master Services Agreement. Unauthorized sharing or distribution to third parties is strictly prohibited.

STATE OF OHIO - BUREAU OF MOTOR VEHICLES
CERTIFICATE OF REGISTRATION

PLATE NO.: KBH9580 **REG. DATE:** 10/28/2026 **EXP. DATE:** 04/16/2027 **ISSUE DATE:** 10/28/2026 **APP NO.:** 717417ME
VALIDATION NO.: 704KBH9580 **AGENCY:** 7726
OWNER NAME: SEAN ANTHONY FRAZIER **VEHICLE OWNERSHIP:** SINGLE **USER ID:** JC
OLD APP NO.: 827208LV
OWNER ADDR.: 67780 TULANE RD **OLD PLATE:** KBH9580
CITY: SAINT CLAIRSVIL
STATE OH **ZIP:** 43950-8724
TAX DISTRICT: RICHLAND TOWNSHIP
COUNTY: BELMONT
INSIDE CORP LIMIT: NO **VEHICLE CLASS:** PASSENGER
VEHICLE YEAR: 2026 **ODOMETER READING:** 08
BODY TYPE: SW **MAKE:** LEXS

Anatomical donor: Yes. Upon my death, I make an anatomical gift of my organs, tissues and eyes for any purpose authorized by law.

STATE FEES:	$1.00
LOCAL TAX:	$0.00
REFL./CO. FEE:	$0.00
DEPUTY FEE:	$8.00
TOTAL FEES:	$9.00

CERTIFICATE TITLE NO.: 6703440746 **PLATE TYPE:** SUNRISE IN OHIO
VEH. SERIAL NO.: JTJVBCDX6T5100164 **REG TYPE:** TRANSFER
PURCHASE DATE: 10/12/2026
SUSPENSION/REVOCATION: NO
PRIOR OPERATION: YES
FEES PAID: YES

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- PROOF OF COVERAGE IS REQUIRED: Whenever a police officer issues a traffic ticket*At all vehicle inspection stops*Upon traffic court appearances.
- ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL:*Lose his or her driver license until requirements are met on first offense, ONE YEAR on second offense, and TWO YEARS on additional offenses*Pay reinstatement fees of $40.00 for first offense, $300.00 for second offense, $600.00 for third and subsequent offenses*Be required to maintain special FR coverage (SR-22) on file with the Bureau of Motor Vehicles (BMV) for ONE YEAR.
- IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE: In addition to all the penalties listed above, you may have*A SECURITY SUSPENSION for TWO YEARS or more and*A JUDGEMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW.
- WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.
- WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING:*AN INSURANCE POLICY showing automobile liability insurance of at least $25,000 bodily injury per person, $50,000 injury two or more persons, and $25,000 property damage*AN INSURANCE IDENTIFICATION CARD (same coverage)*A SURETY BOND OF $30,000 issued by any authorized surety company or insurance company*A BMV BOND SECURED BY REAL ESTATE having equity of at least $60,000*A BMV CERTIFICATE FOR MONEY in the amount of $30,000 on deposit with the Registrar of Motor Vehicles *A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at least twenty-six motor vehicles.

PROOF OF FINANCIAL RESPONSIBILITY

I affirm that all owners (or lessees of leased vehicle) now have insurance or other FR coverage and will not operate or permit the operation of this motor vehicle without FR coverage; all previous registration fees due have been paid; this plate category is correct; and this vehicle will not be used as a commercial or farm vehicle unless so registered.

By signing below I agree to and attest that all the above is true and accurate,

X *SIGNATURE ON FILE*

SIGNATURE OF OWNER(S) DATE

WARNING: APPLICANT GIVING FALSE INFORMATION IS SUBJECT TO PROSECUTION-O.R.C. SEC. 2921.13.
APPLICATION MUST BE SIGNED BY THE OWNER(S) AS NAMED ON CERTIFICATE OF TITLE.

DO NOT DISCARD.
THIS IS YOUR VEHICLE REGISTRATION CERTIFICATE.

BMV5701 4/25 [760-1058] Printed on: 10/28/2026 2:24:13 PM RESTRICTED **CUSTOMER COPY**

NON-NEGOTIABLE - FOR REGISTRATION ONLY

ISSUING COUNTY PORTAGE
ISSUING TITLE OFFICE # 6701
RESIDENT COUNTY BELMONT

STATE OF OHIO
MEMORANDUM TITLE

TITLE No. 67 0344 0746
ISSUE DATE 10/27/2026

IDENTIFICATION NUMBER	YEAR	MAKE	MAKE DESCRIPTION
JTJVBCDX6T5100164	2026	LEXS	LEXUS

CONVERSION	MILEAGE	BODY TYPE	MODEL DESCRIPTION
	8	SW	GX 550

EVIDENCE
PA-MCO - OUT OF STATE

MILEAGE NOTATION
ACTUAL

COMMENTS

PURCHASE PRICE	TAX
$88,143.00	$3,707.87

NOTATION(S)

OWNER(S)
SEAN ANTHONY FRAZIER

67780 TULANE RD
SAINT CLAIRSVILLE, OH 43950

PREVIOUS OWNER(S)
ROHRICH LEXUS

2540 WASHINGTON RD
CANONSBURG, PA 15317

FIRST LIENHOLDER DATE OF LIEN 10/27/2026
USX FEDERAL CREDIT UNION

PO BOX 1728
CRANBERRY TWP, PA 16066

MEMORANDUM TITLE
SAVE
LEGAL DOCUMENT

PORTAGE COUNTY CLERK OF COURTS, RAVENNA, OHIO

WITNESS MY HAND AND OFFICIAL SEAL THIS 27TH DAY OF OCTOBER, 2026

%240266200

JILL FANKHAUSER DLB
CLERK OF COURTS G DLB

RECEIPT

STATE OF OHIO

PORTAGE COUNTY
JILL FANKHAUSER
CLERK OF COURTS

6703440746

10/27/2026 7:41:42 AM

Batch Number: 57366145 - 7 **Bass Receipt Number:**
Receipt Name: VITU
Control Number: 240266200 **County of Residence:** BELMONT **Year:** 2026
VIN: JTJVBCDX6T5100164 **Make:** LEXS **Make Desc:** LEXUS
Model Desc: GX 550
Body Type: SW **Brand 1:**
Brand 2:
Brand 3:

Owner Information

SEAN ANTHONY FRAZIER

Previous Owner Information

Name: ROHRICH LEXUS
Vendor Number: **Dealer Permit Number:** **DBA:**

Lienholder Information

Lienholder 1: USX FEDERAL CREDIT UNION

☑ Memo Issued

Property/Tax Information

Purchase Date:	10/12/2026
Purchase Price:	$88,143.00
Trade-in Amount:	$37,000.00
Taxable Amount:	$51,143.00
Sales Tax:	$3,707.87
Sales Tax Credit:	$0.00
Vendor Discount:	$0.00
Total Tax:	$3,707.87

Fee Information

Title Fee:	$18.00
Total Fees:	$18.00
Total:	$3,725.87

G
DLB

OHIO CERTIFICATE OF TITLE

ISSUING COUNTY PORTAGE
ISSUING TITLE OFFICE # 6701
RESIDENT COUNTY BELMONT

STATE OF OHIO

TITLE No. 67 0344 0746
ISSUE DATE 10/27/2026

ORIGINAL

IDENTIFICATION NUMBER
JTJVBCDX6T5100164

YEAR: 2026
MAKE: LEXS
MAKE DESCRIPTION: LEXUS

CONVERSION

MILEAGE: 8
BODY TYPE: SW
MODEL DESCRIPTION: GX 550

EVIDENCE
PA-MCO - OUT OF STATE

MILEAGE NOTATION
ACTUAL

COMMENTS

PURCHASE PRICE
$88,143.00

TAX
$3,707.87

NOTATION(S)

OWNER(S)
SEAN ANTHONY FRAZIER

67780 TULANE RD
SAINT CLAIRSVILLE, OH 43950

PREVIOUS OWNER(S)
ROHRICH LEXUS

2540 WASHINGTON RD
CANONSBURG, PA 15317

FIRST LIENHOLDER
USX FEDERAL CREDIT UNION

DATE OF LIEN 10/27/2026

PO BOX 1728
CRANBERRY TWP, PA 16066

LIEN DISCHARGE
Lienholder

by:
Authorized Signature Date

CLERK LIEN CANCELLATION
by:
Deputy Clerk Date

WITNESS MY HAND AND OFFICIAL SEAL THIS 27TH DAY OF OCTOBER, 2026

%240266200

%240266200

PORTAGE COUNTY CLERK OF COURTS, RAVENNA, O.

JILL FANKHAUSER
CLERK OF COURTS

G

DLB
DLB

ERASURES AND ALTERATIONS VOID THIS TITLE

ERASURES AND ALTERATIONS VOID THIS TITLE

TITLE DOCUMENT CONTAINS OHIO WATERMARK WHICH IS VISIBLE WHEN HELD TO LIGHT

BMV 3800 1/19 [760-1503]

ASSIGNMENT OF OWNERSHIP This vehicle was a (if applicable): ☐ Law Enforcement Vehicle ☐ Flood Vehicle ☐ Taxi

WARNING TO TRANSFEROR AND TRANSFEREE (SELLER AND BUYER): You are required by law to state the true selling price. A false statement is in violation of section 2921.13 of the Revised Code and is punishable by six months' imprisonment or a fine of up to one thousand dollars, or both. All transfers are audited by the department of taxation. The seller and buyer must provide any information requested by the department of taxation. The buyer may be assessed any additional tax found to be due.

To be completed by Seller and signed in front of Notary/Authorized Officer

Buyer(s) Printed Name(s) _____

Buyer(s) Printed Address _____

I (we) certify the vehicle/watercraft/outboard motor described in this title was transferred on ____/____/____ for the price of $_____ to the above listed buyer(s).

ODOMETER CERTIFICATION: Federal and state laws require that you state the mileage in connection with transfer of ownership. Failure to complete or providing false information may result in fines and imprisonment.

Odometer Reading:

☐☐☐,☐☐☐ Miles (no tenths)

Thousands

Seller is a minor ☐ Yes ☐ No If yes, BMV 3751 Form required

I (we) warrant the title to be free of all liens.

I (we) hereby certify that to the best of my (our) knowledge:

Check one (Mileage status information will print on the front of the title)

☐ The odometer reading reflects the actual mileage
☐ The odometer reading is in EXCESS of the mechanical limits
☐ The odometer reading is not the actual mileage (e.g., Broken odometer) - WARNING-ODOMETER DISCREPANCY
☐ Exempt from mileage disclosure (e.g., APV, Repossession, Inheritance)

_____ X _____

Seller's Printed Name — Seller's Signature **(Must sign in front of Notary/Authorized Officer)**

_____ X _____

Additional Seller's Printed Name (if applicable) — Additional Seller's Signature (if applicable) **(Must sign in front of Notary/Authorized Officer)**

_____

Seller's Printed Street Address — City — State — Zip

Notary/Authorized Officer

****Note** All applicable blank spaces above must be completed before acknowledgement by notary**

Sworn to and subscribed in my presence this _____ day of _____, 20_____,

in _____ County, State of _____.

X _____ _____

Signature of Notary Public or other Authorized Officer by law — My commission expires

BUYER'S ACKNOWLEDGEMENT OF ABOVE ODOMETER CERTIFICATION

_____ X _____

Buyer's Printed Name — Buyer's Signature

_____ X _____

Co-Buyer's Printed Name (if applicable) — Co-Buyer's Signature (if applicable)

APPLICATION FOR CERTIFICATE OF TITLE (Type or print in Ink.)

To be completed by Applicant/Buyer and signed in front of Notary/Authorized Officer

Check Type of Application(s): ☐ Motor Vehicle ☐ Memorandum ☐ Watercraft ☐ Outboard Motor ☐ Salvage

Applicant's Printed Name _____ SSN/EIN _____

Co-Applicant's Printed Name (if applicable) _____ SSN/EIN _____

Applicant's Printed Address _____

Street — City — State — Zip — County

Purchase Price $_____ Gross Tax Due $_____ Vendor's Discount $_____ Tax Paid $_____

If Tax Exempt, state reason _____ Dealer Permit # _____ Vendor # _____ Trade in $_____

LIEN INFORMATION: If no lien, state "none." If more than one lien, attach statement of all additional liens.

Lienholder _____ E-Lien # _____

Lienholder Address _____

Condition of vehicle/watercraft/outboard motor (check only one) ☐ Good ☐ Fair ☐ Poor ☐ Wrecked Print Title ☐ Yes ☐ No

With Right of Survivorship ☐ Yes ☐ No Transfer on Death ☐ Yes ☐ No If yes, BMV 3811 Form required

Applicant is a minor ☐ Yes ☐ No If yes, provide Date of Birth ____/____/____ and BMV 3751 Form required

I (we) state that all information contained in this application is true and correct.

X _____

Applicant's Signature **(Must sign in front of Notary/Authorized Officer)**

X _____

Co-Applicant's Signature (if applicable) **(Must sign in front of Notary/Authorized Officer)**

Notary/Authorized Officer

****Note** All applicable blank spaces above must be completed before acknowledgement by notary**

Sworn to and subscribed in my presence this _____ day of _____, 20_____,

in _____ County, State of _____.

X _____ _____

Signature of Notary Public or other Authorized Officer by law — My commission expires

LATE FEE OF $5.00 FOR FAILURE TO APPLY FOR TITLE WITHIN 30 DAYS OF ASSIGNMENT.