

MUNICIPALITY REPORT OF ABANDONED MOTOR VEHICLE

H-109 REV. 3-2018

STATE OF CONNECTICUT
DEPARTMENT OF MOTOR VEHICLESTITLE SECTION
60 STATE STREET, WETHERSFIELD, CT 06161
On The Web At ct.gov/dmv**INSTRUCTIONS**

1. Complete SECTION A for each abandoned motor vehicle which is determined to be: (a) valued at \$500.00 or less; (b) unusable as a motor vehicle; and (c) without a valid marker plate (C.G.S. §14-150(d)).
2. Submit original form to the Department of Motor Vehicles within 48 HOURS of the time the motor vehicle is taken into custody.
3. Retain a copy and complete SECTION B when vehicle ownership is transferred. Submit copy to transferee in lieu of a vehicle title.

TO: DEPARTMENT OF MOTOR VEHICLES, TITLE SECTION, 60 STATE STREET, WETHERSFIELD, CT 06161**SECTION A - TO BE COMPLETED WHEN MUNICIPALITY TAKES POSSESSION OF MOTOR VEHICLES**

NAME OF MUNICIPALITY <i>(in which title is vested)</i>			DATE AND TIME VEHICLE TAKEN INTO CUSTODY
NAME OF OFFICER OR INSPECTOR <i>(who determines vehicle meets C.G.S. §14-150(d))</i>			BADGE NUMBER
VEHICLE INFORMATION	YEAR	MAKE/MODEL	VEHICLE IDENTIFICATION NUMBER
	LOCATION VEHICLE ABANDONED <i>(No. & Street)</i>		<i>(City or Town)</i>
BUSINESS NAME & ADDRESS OF TOWER			AMOUNT OF CHARGE IMPOSED BY TOWER \$

I hereby certify the above abandoned vehicle meets the specifications of C.G.S. §14-150(d) and that the vehicle identification number has been checked through NCIC.

DEPARTMENT NAME

AUTHORIZED SIGNATURE OF MUNICIPAL OFFICIAL X	DATE SIGNED
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SECTION B - TO BE COMPLETED WHEN MUNICIPALITY TRANSFERS OWNERSHIP OF MOTOR VEHICLE TO JUNKYARD

TRANSFEEEE INFORMATION	NAME
	ADDRESS <i>(No. & Street)</i> <i>(City or Town)</i> <i>(State)</i> <i>(Zip Code)</i>
DEPARTMENT NAME	
AUTHORIZED SIGNATURE OF MUNICIPAL OFFICIAL X	DATE SIGNED