

VEHICLE REGISTRATION/PLATE STATUS FORM

Complete the following information (please print):

FROM: Name: _____ Date: _____
(Registered Owner of Vehicle)
Address: _____
Driver License #: _____
Vehicle ID #: _____
Year/Make of Vehicle: _____
Plate #: _____

The vehicle has been (check one):

- Sold Junked Repossessed Impounded
 Not-in-use (explain): _____

The license plates were (check one):

- Destroyed Left on the vehicle Transferred
 Surrendered to MVC on _____ at _____
(date) (location)
 Lost (Explain): _____

 Stolen (not recovered)

The registration certificate was (check one):

- Destroyed Left on the vehicle
 Surrendered to MVC on _____ at _____
(date) (location)
 Lost (Explain): _____

 Stolen (not recovered)

I certify that the above information is true:

Signature _____ Date _____