



Vehicle/Vessel/OHV Identification Number Inspection Certificate

MVD Use Only

1003 Buckskin Drive, Deer Lodge, MT 59722 -2375 • Phone (406) 444-3661 Fax (406) 846-6039 • mvdtitleinfo@mt.gov

Salvage vehicles only: A fee of \$18.50 must be paid to your local driver services station prior to the inspection. Additional fees and taxes may be due upon registration.

** This Section Must Be Completed by the Applicant **

| | | |
|----------------------|-----------------|-----------------------|
| License Plate Number | Expiration Date | State of Registration |
| Owner/Applicant Name | | |
| Address | City | State Zip Code |

** This Section Must Be Completed by the Inspecting Officer **

Level of inspection (check one): **1** **2**

Notice: A **Level 2 inspection** must be conducted by a Montana Department of Justice employee or Montana Peace Officer.

\$18.50 fee required? **No** **Yes** Fee paid? **No** **Yes** Check Number _____

| | | | | | |
|------------------|-------------------|-------------------|-----------------|-------------------------------|-------------|
| Year | Make/Manufacturer | Model | Color | Body Style | Length |
| Vessel MT Number | Vessel Use | Vessel Propulsion | Vessel Material | Vessel Length FT. IN. | Vessel Type |

Vehicle/Vessel/OHV Identification No:

The vehicle has (check one): an odometer a kilometer

(check one) five six digits Odometer/Kilometer Reading:

Describe where the vehicle/vessel/OHV identification number of the **Body** was located:

List what **Identifiers** you found (Public VIN, federal standards, firewall, NHTSA, etc.):

When requested to inspect the **Frame or Secondary VIN**, indicate the number:

If vehicle/vessel/OHV has a salvage title, indicate the title number and state it is from:

I certify that I have physically inspected this vehicle/vessel/OHV and determined that the information provided is correct.
Remarks (use reverse side if more space is needed):

| | | |
|---------------------------|--------------------------------------|------------------------------|
| Signature of Inspector | Date | Badge Number (if applicable) |
| Printed Name of Inspector | Law Enforcement Department or Agency | State |