

**AFFIDAVIT OF REBUILT OR  
REPAIRED SALVAGE VEHICLE**



**SECRETARY OF STATE  
BUREAU OF MOTOR VEHICLES  
"F KXKQP 'QHVK'NG'UGTXE GU**

**Final Vehicle Owner**

**Name:** \_\_\_\_\_ **Vehicle Make:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **Vehicle Model:** \_\_\_\_\_

**City:** \_\_\_\_\_ **VIN:** \_\_\_\_\_

**State:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_ **Phone:** (\_\_\_\_) \_\_\_\_\_ **CTA#:** \_\_\_\_\_ **R:** \_\_\_\_\_

**Instructions for Part A:** Use **Part A** to list parts used in the repair of the salvage vehicle. In the "KEY" section beside each part listed indicate whether the component was replaced with a new part (N), or a used part (U), or if the part was repaired (R) instead of replaced. *Bills of sale for new components must accompany this form.* For used parts list VIN and title information below.

KEY N/U/R	PART	L-Left R-Right	VIN	TITLE STATE	TITLE NUMBER	DATE SURRENDERED
	FENDER					
	FRONT DOOR					
	REAR DOOR					
	QUARTER					
	AIRBAG (S)	Serial Number(s) for each new airbag				
	AIRBAG (S)	Record VIN if used airbag				
	COMPLETE FRONT CLIP	If a full clip is used, record VIN				
	COMPLETE REAR CLIP	If a full clip is used, record VIN				
	ROOF					
	HOOD					
	TAILGATE/HB/LID					
	CARGO BED					
	FRAME					
	ENGINE					
	TRANSMISSION					
	TRANSFER CASE					
	FRONT FORK (MC)					
	CRANKCASE (MC)					

**No repairs made. (Please explain):** \_\_\_\_\_

Date: \_\_\_\_\_ Repairer's signature: \_\_\_\_\_

Address: \_\_\_\_\_ Telephone: \_\_\_\_\_

I, the above signed, under penalties of false statement do certify the information in Part A is true and correct to the best of my knowledge.

