AFFIDAVIT OF REBUILT OR REPAIRED SALVAGE VEHICLE



SECRETARY OF STATE BUREAU OF MOTOR VEHICLES DIVISION OF TITLE SERVICES

	Final Vehicle Owner						
Name:	Vehicle Make:						
Address City:							
State: _	ZIP	Phone: (_		CTA#:		R	
Instruction indicate w	ons for Part A: Use I whether the component	Part A to list parts use was replaced with a	ed in the repair of the sal new part (N), or a used phis form. For used parts	vage vehicle. In the "part (U), or if the part	KEY" section be was repaired (R)	side each part listed	
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	r(s) for each new airbag				
	AIRBAG (S)	Record V	IN 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 repai	irs made. (Please ex	plain):					
Date:	Rep	pairer'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.

DISPOSITION OF SALVAGE VEHICLE



SECRETARY OF STATE **BUREAU OF MOTOR VEHICLES DIVISION OF TITLE SERVICES**

PART B

NOTICE: You must surrender the title of a salvage vehicle to the Maine Bureau of Motor Vehicles as soon as you remove any component part as listed in Part A of the reverse of this form, or as soon as a salvage vehicle is scrapped, compressed or destroyed, even if the title is from another state.

INSTRUCTIONS: Use Part B to inform the Secretary of State that a salvage vehicle has been scrapped, dismantled, compressed or destroyed. (If the salvage vehicle has been rebuilt use Part A on the reverse of this form.) A salvage vehicle is any vehicle for which an insurance company has made a total loss payoff or which an owner declares is only useful for parts.

PERSON OR COMPANY SURRENDERING TITLE (S)

NAME_						
ADDRESS						
TITLES SURRENDERED						
TITLE NUMBER	STATE	VIN				
-						
Under penalties of false statement, I, the dismantled, compressed or destroyed.	undersigned, certify that t	he vehicles described in the attached certificates of title were scrapped,				
Signature:		Date:				