

(Date of Letter)

(Motor Vehicle Division)

(Room, Floor or P.O. Box)

(Government Office Building)

(Street Address)

(City, State and Zip Code)

RE: Motor Vehicle Registration License Information

Attn: Records Clerk

Dear Records Clerk:

Kindly provide the undersigned with the identity of the vehicle to which the following (registration/license) number belongs. It is my understanding that this information is a matter of public record, and the undersigned hereby makes an official request for the information relating to the owner and the operator of the aforementioned vehicle. In addition to the name of the registered owner and/or driver, the make of vehicle, the color of vehicle, and the vehicle identification number are also requested. This information is requested as a result of a vehicular accident which I believe to have occurred on the day of (month/year). It is not known whether an investigative report has been completed.

Should your office need any additional information from the undersigned, or if there are any required fees for this information, please advise. Thank you.

Very truly yours,

(Signature)

(Address)

(City, State and Zip Code)

(Phone Number)

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This is not a substitute for legal advice. An attorney must be consulted.