

(Date of Letter)

(Department of Motor Vehicles)

(Street Address)

(City, State and Zip Code)

RE: Inquiry/Title Transfer

Attn: Registration Clerk

Dear Registration Clerk:

Please verify the vehicle identification number of the following vehicle:

(describe to the best degree possible the vehicle for which identification verification is sought, including any known identification numbers, license, former license plates, color, make, etc.). Some question has apparently arisen relative to damage to this vehicle and, at this time, there is some doubt as to the correct vehicle identification number; therefore, please verify the correct identification number for the vehicle described above. Should you need any additional information from the undersigned, please advise.

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.