

Please type or print in blue or black ink

APPLICATION FOR SALVAGE TITLE OR NON-REPAIRABLE CERTIFICATE

NRS 487.480

Insurance Company, Licensed Nevada Business, Wrecker or Recycler Information:

Business Name						
Nevada DMV Business Lic	ense Number or	FEIN				
Physical Nevada Address						
		Address		City	State	Zip Code
Current Mailing Address						
- /	,	Address		City	State	Zip Code
Telephone: (_)		Email Address			
Individual Informatio	n:					
Full Legal Name						
Nevada Driver's License, II	O Number or DOI	В				
Physical Nevada Address						
		Address		City	State	Zip Code
Current Mailing Address						
		Address		City	State	Zip Code
Telephone: (_)		Email Address			
Signature of Applicant Date The original, properly endorsed Certificate of Title, and/or other required documents, must be attached for the						
vehicle listed on this app			-			
Vehicle Identification Numb	ber					
Year	Make		1[1[Model		
	or Individual	Please check		License	ed Wrecker (age liance with N	-
Insurance Company Owner: Please check $$ appropriate	or Individual e box Flood Damaged			License	age	-
Insurance Company Owner: Please check √ appropriate ☐ Total Loss ☐F	or Individual box Flood Damaged 7.800	Duplicate	√ if duplicate:	License	age	-

NOTE: Please include a check or money order for the **\$10.00** Salvage Title fee. Licensed Nevada Automobile Wreckers are <u>exempt</u> from the Salvage Title fee.