West Virginia Department of Transportation

## **Division of Motor Vehicles**

## **Salvage Certificate Application**



1-800-642-9066 dmv.wv.gov

Name			Daytime Phone		
Address	STREET ADDRESS		CITY	STATE	ZIP
Vehicle Informati	on				
Make	Year	VIN No.			
Style of Body	Weigh	PASSENGER VEHICLE	Or	Odometer Reading	
COMPLETE THIS SECT IF APPLICABLE		sting NON-REPAIRABI % damaged & not to be rec IS DUE		Damage Fire Damage \$22.50 FEE	Salvage \$22.50 FEE
INDICATE DAMAGE BY	CHECKING THE APP	PROPRIATE BOX, O	R LIST PART UNDER	"OTHER".	
☐ Front Bumper ☐ Grill Assembly ☐ Hood ☐ Fender - Left ☐ Fender - Right ☐ Door Front - Left ☐ Door Front - Right ☐ Door Rear - Left ☐ Door Rear - Right	<ul> <li>□ Windshield</li> <li>□ Side Glass - Left</li> <li>□ Side Glass - Right</li> <li>□ Rear Glass</li> <li>□ Roof Panel</li> <li>□ Qtr. Panel - Left</li> <li>□ Qtr. Panel - Right</li> <li>□ Deck Lid</li> <li>□ Rear Door S/W</li> </ul>	☐ Seats ☐ Radio Unit ☐ Battery	Other Includes: B	oats, Campers, Cycles, and n	nisc.
Lienholder Inforr	nation (If required)				
Name	HOLDER	Amount	Date	Lender Code	
Address	STREET ADDRESS		CITY	STATE	ZIP
Applicant Certific		risonment, that the st	catements made herein a	are correct to the best of my kn	owledge and belief.
PRINTED NAME OF INSURANCE COM  (X)  ORIGINAL SIGNATURE OF INSURANCE		MANIED AND CODIFE OD STANDS	1 1		

<sup>\*</sup>ANY ALTERATIONS OR ERASURES WILL VOID THIS FORM.