



Department of Motor Vehicles
P.O. Box 27412
Richmond, Virginia 23269-0001

NOTICE OF VEHICLE DISPOSITION

Owner's Name	<i>Last</i>	<i>First</i>	<i>Middle</i>
Driver's License Number		Date Information Requested	
Vehicle Identification Number			
Vehicle Make	Vehicle Year	Plate Number	Plate Expiration Date
Insurance was cancelled because the vehicle was: <i>(check applicable box)</i>			
<input type="checkbox"/>	Sold _____ <i>(Date Sold)</i>	<input type="checkbox"/>	Parked (operable) _____ <i>(Begin Date)</i>
<input type="checkbox"/>	Traded _____ <i>(Date Traded)</i>	<input type="checkbox"/>	Inoperable (repairable) _____ <i>(Begin Date)</i>
<input type="checkbox"/>	Demolished _____ <i>(Date Demolished)</i>	<input type="checkbox"/>	Inoperable (non-repairable) _____ <i>(Begin Date)</i>
<input type="checkbox"/>	Moved out-of-state _____ <i>(Date of Move)</i>		

I understand that since this vehicle is not insured and the uninsured motor vehicle fee was not paid, DMV will cancel the registration and license plates for the parked or inoperable vehicle. Plates currently issued to the vehicle will be invalid and cannot be used to operate the vehicle on the highways.

I hereby understand that to purchase and possess valid license plates and decals, I must insure my vehicle with automobile liability insurance or pay the uninsured motor vehicle fee – even if the vehicle is not running or not being used. If liability insurance coverage on my vehicle terminates or cancels during the registration period, I must immediately reinsure the vehicle, pay the uninsured motor vehicle fee or surrender the license plates to DMV.

You must acknowledge your signature below before a Notary Public and the Notary Public must administer an oath and complete the acknowledge portion of the "Affirmation By Vehicle Owner"

AFFIRMATION BY VEHICLE OWNER

I swear or affirm that the vehicle described above was parked or inoperable on stated date .

Vehicle Owner's Signature _____
Date

COMMONWEALTH OF VIRGINIA

City/county of _____ to wit:

This form was acknowledged before me this _____ day of _____, 20_____.

By _____
Name of Vehicle Owner

My commission expires _____

NOTARY PUBLIC

FOR DMV USE ONLY

Vehicle is currently: <input type="checkbox"/> Insured <input type="checkbox"/> Uninsured	If parked or inoperable, were license plates surrendered? <input type="checkbox"/> Yes <input type="checkbox"/> No	Teller/CSC Stamp
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