

West Virginia Department of Transportation
Division of Motor Vehicles



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

VS TRAILER INSPECTION AFFIDAVIT

I, _____, do hereby certify that the trailer listed below conforms with
Name of Inspector

all of the general inspection requirements outlined in the Motor Vehicle Inspection Manual for class C trailers.

Inspection Station: _____ Station Number: _____

Address: _____
State or Route Number City County Zip

Printed Name of Inspector: _____

Signature of Inspector: _____

Date of Inspection: _____

TRAILER INFORMATION:

Year: _____ Make: _____

Vehicle Identification Number: _____