

West Virginia Department of Transportation

Division of Motor Vehicles

Cancellation of Record • Only West Virginia Title



PO Box 17710 • Charleston, WV 25317
1-800-642-9066 • dmv.wv.gov

***SEND THIS ORIGINAL DOCUMENT TO DMV AT ADDRESS ABOVE AND KEEP A COPY FOR YOUR RECORDS.**

Recycler's Information

| | | | |
|------------------|-------|----------|--------------|
| NAME OF RECYCLER | | | |
| STREET ADDRESS | | | |
| CITY | STATE | ZIP CODE | PHONE NUMBER |

Vehicle Information

| | | | | |
|--------------|------------|------|-------------------------------|------------------------------|
| TITLE NUMBER | MODEL YEAR | MAKE | VEHICLE IDENTIFICATION NUMBER | DATE VEHICLE RECEIVED / / |
|--------------|------------|------|-------------------------------|------------------------------|

Seller's Information & Certification

| | | | |
|----------------|-------|----------|--------------|
| NAME OF SELLER | | | |
| STREET ADDRESS | | | |
| CITY | STATE | ZIP CODE | PHONE NUMBER |

I hereby certify that the above statement are true and correct to the best of my knowledge and belief under penalty of false swearing West Virginia Motor Vehicle Law §17A-9-1: Fraudulent Applications.

(X) _____

SIGNATURE OF SELLER

DATE ____/____/____

Recycler's Certification

Have you reported the above information to the National Motor Vehicle Title Information System (NMVTIS)? YES NO

I hereby certify that the information above is true and correct to the best of my knowledge and that the vehicle listed above was received by our company in order for the vehicle to be scrapped or destroyed. I also understand that this form is only to be used when no title is surrendered, and that any alterations or erasures will void this form.

(X) _____

SIGNATURE OF RECYCLER REPRESENTATIVE

DATE ____/____/____