



Winters Police Department



JUNK VEHICLE - TRACKING FORM

CASE NUMBER: _____

REPORTING PERSON INFORMATION:

PRINTED NAME: _____ DL# _____ STATE _____

ADDRESS: _____ CITY, _____ STATE: ___ ZIP: _____

PHONE #S: _____ FAX#: _____

LOCATION OF VEHICLE: _____

SIGNATURE: _____ DATE OF COMPLAINT: _____

******* TURN OVER TO POLICE *******

VEHICLE INFORMATION & DESCRIPTION

MAKE / MODEL: _____ YEAR: _____ BODY STYLE: _____

VIN#: _____ LIC#: _____ STATE: _____ YEAR: _____

REGISTERED OWNER'S NAME: _____ DL# _____ STATE _____

CONTACT ADDRESS: _____ CITY, _____ STATE: ___ ZIP: _____

LIENHOLDER NAME: _____

CONTACT ADDRESS: _____ CITY, _____ STATE: ___ ZIP: _____

PROPERTY OWNER'S NAME: _____ (IF DIFFERENT FROM VEHICLE)

CONTACT ADDRESS: _____ CITY, _____ STATE: ___ ZIP: _____

10-29 CHECK RUN ON VEHICLE:

BY: _____ DATE: _____ TIME: _____

(SEE REVERSE SIDE FOR MORE INFORMATION)

1. **INSPECTION OF COMPLAINT:** (Complaint **VALID** or **UNFOUNDED** – Circle One)

BY: _____ DATE: _____ TIME: _____

2. **PHOTOGRAPHS OF VEHICLE:**

BY: _____ DATE: _____ TIME: _____

3. **NOTIFICATION LETTER(S) SENT:** *CERTIFIED MAIL TRACKING #:* _____

BY: _____ DATE: _____ TIME: _____

******* COMPLIANCE SECTION*******

REMEDIAL ACTION TAKEN BY PROPERTY OWNER: _____ **DATE:** _____

VEHICLE IN COMPLIANCE WITH CODE - RE-INSPECTED & PHOTOGRAPHED:

BY: _____ DATE: _____ TIME: _____

******* NON-COMPLIANCE SECTION*******

REMOVAL OF JUNK VEHICLE BY CITY OF WINTERS: _____ **DATE:** _____

REMOVED BY: _____ **TAKEN TO:** _____

NOTIFICATION OF TX DOT (VTR 71-4 FORM) SENT:

BY: _____ DATE: _____ TIME: _____

CERTIFIED MAIL TRACKING #: _____

TITLE TO VEHICLE RECEIVED FROM TX DOT:

BY: _____ DATE: _____ TIME: _____

TRANSFERRED TO DEMOLISHER WITH TX DOT (VTR 71-5):

BY: _____ DATE: _____ TIME: _____

OTHER RESOLUTION TO COMPLAINT: _____ **DATE:** _____

APPROVED BY CHIEF OF POLICE: _____ **DATE:** _____

Signature of Chief of Police