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Salvage Certificate Of Title Application

Idaho Transportation Department

_	Vehicle or Hull Identificati	on Number			Year	Make	Body Type	;	Model
sse on									
Vehicle/Vessel Description	Vehicle is Total Loss Unrecovered Theft								
icle sc	Odometer Reading Odometer Status						Odometer Reading Date		
ehi	(no tenths)	🗌 Mi	☐ Actual ☐ Not Actual	☐ In Excess □ No Device					
>		🗌 Km	Exempt						
	Owner #1- Full Legal Nan						/ EIN if Business		
	Owner #2 - Full Legal Na) □ 0	r 🗌 And	Idaho Driver's License Number or SSN / EIN if Busine			/ EIN if Business		
	LSE DBA								
n	Owner #3- Full Legal Name or Business Name (Last, First, Middle) Idaho Driver's License Number of						r SSN	/ EIN if Business	
atic									
Applicant Information	Physical Address of Owner's Current Legal Residence or Business								
Ifol									
t In	Mailing Address if Different than Physical Address			City			Sta	ate Zi	o + 4
an									
lic	Lienholder of Record Con	npany Name	Address		City			State	Zip
٥d									
٩	Insurance Company Name						Date Total Loss	or Sal	vage Declared
	Check here if you are the titled owner of this vehicle and are now declaring this vehicle to be salvage.								
	Check here if you are a licensed Idaho Dealer.								

For Original Salvage Certificate Application

I, the undersigned, certify that the vehicle/vessel described above has been declared a total loss or salvage by the insurance company listed above, or by the owner of record. I further certify that all information contained herein is true and correct to the best of my knowledge and belief. I hereby make application for a Salvage Certificate for said motor vehicle/vessel. The signature below is my true and legal signature.

Additionally, if a licensed Idaho Dealer, I the undersigned certify that I have physically inspected the vehicle/vessel described above and that the VIN/HIN and date of this application are correct. (Check here if you did not inspect the vehicle/vessel.)

Applicant's Printed Name	Applicant's Signature	Daytime Phone Number	Date
	X	()	

Take the completed form and the original title to any county vehicle licensing office, or mail it with the applicable fee to the following address.

Mailing Address Be Sure to Include the Proper Fee - <u>Do Not</u> Send Cash							
	Mailing Address	Be Sure to Include the Proper Fee - <u>Do Not</u> Send Cash					
Idaho Transportation Department Salvage Certificate Fee	Attn: Vehicle Services Section Salvage Desk PO Box 34	Sales /Use Tax *See Note Below . \$	Card Number				

*Note: Sales/Use Tax is required on the salvage value of the vehicle if the title or other documents indicate the insurance company acquired the vehicle and sold it back to the titled owner.

A salvage vehicle may not be registered until a title has been applied for, and a title may not be applied for until the vehicle is in operating condition and meets the equipment requirements of Idaho Code - Title 49, Chapter 9.

If you have questions, please contact the ITD Salvage Unit at:

(208) 334-8485, Monday - Friday, 8:00 a.m. - 4:00 p.m. Mountain Time.

Thank You