

OFFICE USE ONLY	
Received	_____
Returned	_____



State Of Tennessee, Department Of Revenue
 Taxpayer and Vehicle Services Division
 Vehicle Services Section
 44 Vantage Way, Suite 160
 Nashville, TN 37243-8050
 Phone: (615)741-3101 Fax: (615)253-4259
 Toll-Free: (888)871-3171

REQUEST FOR VERIFICATION OF OWNERSHIP: VEHICLES FOUND ABANDONED/IMMOBILE OR UNATTENDED

Note: A fee of \$1.00 must be submitted with this form

PART A: REQUESTING PARTY AND VEHICLE INFORMATION

_____ () _____		
Company Name	Telephone Number	

Applicant's Name		

Street Address		

Mailing Address – If different from street address		

City	State	Zip
Date Storage Began: _____ (Attach Copy of Law Enforcement Towing Form; if not available, attach explanation.)		

YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER	LICENSE PLATE	STATE

****MUST FURNISH VERIFICATION OF VEHICLE IDENTIFICATION NUMBER WITH THIS REQUEST****

If available, please list the vehicle's plate number and state of issue.

Tennessee Code Annotated, Section 55-16-105 et seq.: A TENNESSEE LAW ENFORCEMENT AGENCY shall verify ownership information through the Tennessee Enforcement System (TIES) for processing by the police agency or any towing company contracting with the police agency. Any response not on file with the TIES system and queries made by persons other than a police agency or towing firm shall be referred to the Tennessee Department of Revenue, Taxpayer and Vehicle Services Division. All lienholders and owners must be notified by certified mail, return receipt requested, within three (3) business days from receiving verification of ownership of such vehicle.

TAXPAYER AND VEHICLE SERVICES USE ONLY

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NOTE: Per Tenn. Code Ann. § 55-16-102, persons failing to submit notification within (10) days after the termination of the thirty (30) day period forfeit all claims for storage or parking of such vehicle and commit a Class C misdemeanor. Each day's FAILURE to report is a separate offense.

 Signature "I certify that all information is true and correct" _____
 Date

Notice of thirty (30) day storage must be made by completing PART B on the reverse side. Submit this form to the Taxpayer and Vehicle Services Division of the Tennessee Department of Revenue by U.S. mail at the address indicated above. For faster service, you may fax Part B of this form to (615) 253-4259.

REQUEST FOR VERIFICATION OF OWNERSHIP: VEHICLES FOUND ABANDONED/IMMOBILE OR UNATTENDED

PART B: REPORT OF MOTOR VEHICLE STORED FOR A PERIOD OF MORE THAN THIRTY (30) DAYS

YEAR	MAKE	MODEL	VEHICLE IDENTIFICATION NUMBER	LICENSE PLATE	STATE

****MUST FURNISH VERIFICATION OF VEHICLE IDENTIFICATION NUMBER WITH THIS REQUEST****

If available, please list the vehicle's plate number and state of issue.

NOTE: If a vehicle has been stored, parked or left in a garage, trailer park, or any type of storage or parking lot for a period of more than thirty (30) consecutive days, the owner of such garage, trailer park or lot shall report in writing the make and vehicle identification number of such motor vehicle to the Department of Revenue on this form. Failure to submit this PART B within (10) days after the termination of the first (30) thirty days of storage is a Class C misdemeanor. **Each day's failure to report is a separate offense.** Additionally, any person who fails to submit this report shall forfeit all claims for storage or parking of the vehicle.

Per Tenn. Code Ann. § 55-16-101(a), please be advised that the above referenced vehicle has been stored, parked, or left in the storage lot of our company for a period of time more than thirty (30) consecutive days as of _____.

Under penalties of law, I certify and attest that all information and statements made herein are true and correct.

Signature

Witness of Certification

Date

Company Name: _____ Address/City/State/Zip: _____