Front MVR-4F (Rev.11/13) \$15.00 FEE

North Carolina Department of Transportation DIVISION OF MOTOR VEHICLES AFFIDAVIT AND NOTIFICATION TO OWNER

VEHICLE SECTION							
TITLE NUMBER	YEAR	MAKE		IFICATION NUMBE	R		BODY STYLE
OWNER/REGISTRANT SECTION							
Owner 1 ID #							
Full Legal Name of Owner/Registrant 1 (First, Middle, Last, Suffix) or Company Name Owner 2 ID #							
	Full Legal Name	of Owner/Regis	strant 2 (First, N	liddle, Last, Suffix)	or Company	Name	
Residence Address (Individual) Busine			,				
City and State				Zip Code		County	
Mail Address (if different from above)							
SECTION A: CERTIFICATION BY INSURANCE COMPANY (COMPLETE IF TOTAL LOSS CLAIM WAS PAID)							
This is to certify that the insurance company listed below has paid a total loss claim on the above listed vehicle. I also certify that a notice requesting the title was sent via certified mail to the owner and any recorded lienholder at least 30 days prior to submitting this form to the Division. Proof of payment of a total loss claim to the lienholder (if applicable)/owner is attached showing evidence that funds were paid to the first recorded lienholder shown in the Division's records. I certify that all information and supporting documents submitted are true and accurate. Proof of payment of total loss claim and proof of request for title sent to the Owner/Lienholder MUST be attached to this form.							
Name of Insurance Company Name of Claims Representative							
Claim number	im number			Phone # of Claims Representative			
Address			City			State and Zip Co	ode
SECTION B: CE	RTIFICATIO	N BY DEA	LER (COM	PLETE IF TOTAL L	OSS CLAIM	WAS NOT PAI	D)
This is to certify that I am a North Carc companies. I also certify that upon rec up the vehicle was sent via certified m copy of the notice and proof of deliver	ceiving a release s nail at least 30 da	statement from ys prior to subr	n the insurer, a r	notice requesting th n to the Division. I h	ne owner and nave attached	d any recorded lie d the release from	enholder to pick
Proof of notice sent to the Owner and/or any Lienholder MUST be attached to this form.							
Name of Dealer		Name of Agent for Dealer					
Address			City	-		State and Zip Co	ode
Notice Sent To:(Owner Name and Add				Date Notice Mailed:			
Notice Sent To:(Lienholder Name and Address)							
Odometer ONC (odometer not certified)	To my knowledge the vehicle described herein: Yes No Has been involved in a collision or other occurrence to the extent that the cost to repair exceeds 25% of fair market retail price. Yes No Has been a flood vehicle, a reconstructed vehicle or a salvage vehicle.						he cost to
<u>Disclaimer</u> : G.S. 20-109-1 (b) (2) "The Division	•			•			
pursuant to this section if the claim is based subdivision (b) (2) or subsection (e1) of this	section.					vision by a third pa	rty pursuant to
Signature of Authorized Agent or Representative							
Date County State State State I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the							
foregoing document for the purpose s	tated therein and	d in the capacit	y indicated:			(Name(s) of	f Principal(s)).
Notary Signature Notary Printed Name							
(SEAL) My Commission Expires							

PURPOSE

This form is to be used by an NC insurance company when a salvage vehicle owner fails to assign and deliver the vehicle's certificate of title to the insurer within 30 days of the payment of the claim in accordance with North Carolina General Statute 20-109(b)(1). This form may also be used by a North Carolina car dealer, whose primary business whose is the sale of salvage vehicles on behalf of insurers and taking possession of salvage vehicles that are the subject of insurance claims, where an owner or lienholder abandons the vehicle.

INSTRUCTIONS FOR THE INSURANCE COMPANY

Insurer must send certified request for title at least 30 days prior to submitting request from the Division and provide proof of delivery. Insurer must provide proof of payment of the claim. Insurer must provide evidence that funds were paid to the first lienholder shown on the Division's record. Insurer must complete all application sections of the form including odometer and damage disclosure certification. Upon receipt of form MVR-4F, supporting documents and a fee of \$15.00 the Division will issue the insurer an MVR-40 (salvage certificate) to be used to sell the vehicle.

INSTRUCTIONS FOR THE NC DEALER

Dealer must be licensed in North Carolina and operate a business in accordance with North Carolina General Statutes 20-109(e1). Dealer must have authorization from the insurance company to release the vehicle to the owner or lienholder. Dealer must have possession of vehicle for 30 days. Dealer must send notification via certified mail to the lienholder or owner informing them that the vehicle is available for pickup. Notice shall include outstanding charges owed to the motor vehicle dealer. Dealer must provide proof of delivery of notice. Dealer may submit request for title by submitting MVR-4F if the vehicle is not picked up within 30 days. Dealer must complete all applicable sections of the form including odometer and damage disclosure certification. Upon receipt of form MVR-4F, supporting documents and a fee of \$15.00, the Division will issue the Dealer a MVR-40 (salvage certificate) to be used to sell the vehicle.