



Montana Salvage Receipt

Fee: \$5.15

Fees include 3% administration fee per MCA 61-3-111
Make checks payable to State of Montana

Office Use Only

Vehicle Services Bureau

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431 Phone (406) 444-3661 Fax (406) 444-0116 • mvdtitleinfo@mt.gov

Application for Salvage Certificate 1. I am the applicant making claim of ownership on the following motor vehicle to obtain a Salvage Certificate for that vehicle pursuant to Montana law.

Business Name if Applicable			DL/FEIN/Tribal ID/Corp ID*			
Legal Name of Applicant if Individual			Driver License Number			
2. Residential or Business Address	City	State	Zip Code	4. County of Residence		
3. Mailing Address	City	State	Zip Code			
Email Address			Phone Number			

Vehicle Description	5. Vehicle Identification Number	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	6. Year	7. Make	8. Model	9. Body Style	10. Color										

When OUT-OF-STATE title info is available, complete fields 11-14:	11. Out-of-State Title No.	12. Title Date	13. Issuing State
14. Out-of-State Registered Owner's Name and Address			

Certification of Salvage Vehicle by INSURER

- I certify that the vehicle described above meets the definition of a salvage vehicle.
- I hereby do sell, transfer, and deliver the above-referenced vehicle to the applicant listed above
- If a certificate of ownership (i.e., title) is not surrendered with this application, I further certify that I have made two attempts to obtain the certificate of ownership from the current titled and registered owner.
- The security interest release (if applicable) and the conforming odometer statement (2011 model vehicle or later) must be submitted.

Certification of Salvage Vehicle by APPLICANT

- I certify that the vehicle described above has been deemed a salvage vehicle by the insurer.
- I have purchased the above-referenced vehicle and I am named as applicant above.

Odometer Certification

Federal law requires you to state the mileage in connection with the transfer of ownership. Failure to complete or providing a false statement may result in fines and/or imprisonment.

I state that this 5 or 6 digit odometer now reads _____ (no tenths) miles, date read _____ and to the best of my knowledge that it reflects the actual mileage **UNLESS one of the following statements is checked:**

STOP! DO NOT check one of the following unless it applies.

I hereby certify that the odometer reading reflects the amount of mileage **IN EXCESS OF ITS MECHANICAL LIMITS.**

I hereby certify that the odometer reading is not the actual mileage. **WARNING – ODOMETER DISCREPANCY.**

Signature Certification

- I certify that I agree to the applicable certification section above (Insurer or Applicant).
- I certify that I have read and agree to the odometer certification.
- I have compared the vehicle identification number shown on this application with the vehicle identification number affixed to the vehicle and they agree.
- Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named in section one of this form; and, if signing for a business entity or trust, I have full authority to do so.

Auction Stamp

If the vehicle was sold through a Montana auction, place the auction stamp here:

Applicant's Legal Signature (Only one signature is required)	Printed Name of Applicant
Signature of Insurance Company Representative	Printed Name of Insurance Company Representative
Dated this _____ day of _____, 20_____	Insurance Company Use Only - Check if COPY: <input type="checkbox"/>

*DL=Driver License No.; FEIN=Federal Employee Identification No.; Tribal ID=Tribal Identification Card No.; Corp ID=Corporate Identification No.