



BMV Fees

APPLICATION FOR NONREPAIRABLE OR SALVAGE CERTIFICATE

SEE INSTRUCTIONS ON REVERSE

(The space above is for Department use only)
Bureau of Motor Vehicles • 1101 South Front Street • Harrisburg, PA 17104

Check (✓) Proper Block

1. ☐ Original Certificate of Salvage2. ☐ Duplicate Certificate of Salvage3. ☐ Original Nonrepairable CertificateCheck here ☐ if vehicle is a total loss due to flood (salvage certificate will be branded with a "W").Check here ☐ if vehicle is a total loss due to theft (salvage certificate will be branded with an "N"). **NOTE:** Section E must be completed if no police incident report is attached.

A APPLICANT INFORMATION				
Last Name (or Full Business Name)		First Name	Middle Name	PA DL/Photo ID# or Bus. ID#
Co-Owner Last Name		First Name	Middle Name	PA DL/Photo ID#
Street Address				NAIC No.
City			State	Zip Code
B VEHICLE DESCRIPTION				
Title Number		Vehicle Identification Number		
Year	Make	Owner's Name as Printed on Face of Attached Title (Only for original certificate of salvage request.)		
I/We certify to the best of my/our knowledge that the odometer reading is _____, _____ ^{NO TENTHS} miles and reflects the actual mileage of the vehicle, unless one of the following boxes is checked: <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <input type="checkbox"/> Reflects the amount of mileage in excess of mechanical limits. <input type="checkbox"/> Is NOT the actual mileage. WARNING: Odometer discrepancy. </div>				
WARNING: Federal and state laws require that you state the mileage in connection with this application. Failure to complete or providing a false statement may result in fines and/or imprisonment.				
C VEHICLE IDENTIFICATION NUMBER & WEIGHT VERIFICATION				
NOTE: If an out-of-state certificate of title is attached to this application, a tracing of the Vehicle Identification Number (VIN) must be affixed in the space provided. If a tracing cannot be obtained, the VIN must be listed and verified by a certified inspection mechanic or authorized agent in the appropriate spaces below.				
List VIN or Tape VIN Tracing Here				
Unladen Weight (Empty)		Gross Vehicle Weight Rating		
Dealer/Business Partner/Mechanic ID#		Authorized Agent or Certified Inspection Mechanic (Print Name)		
I certify that I have verified that a legible tracing cannot be secured and that the above VIN and vehicle weight information listed in Section C is correct.		Authorized Agent or Certified Inspection Mechanic Sign Here		
D APPLICATION FOR DUPLICATE				
REASON: <input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Defaced (Certificate must be attached) <input type="checkbox"/> Never Received <input type="checkbox"/> *Other * Please Explain: _____				
E LAW ENFORCEMENT REPORTING - To be completed by the applicant when applying for an original certificate of salvage, where a theft brand is being added, and no police report is attached.				
Check (✓) One: REPORTED TO: <input type="checkbox"/> Local Law Enforcement <input type="checkbox"/> State Law Enforcement				
Incident Number	Date of Incident	Law Enforcement Station Name	Law Enforcement Telephone Number	
Law Enforcement Station Address			Vehicle Recovery Date (If applicable)	
Nature of Incident		Investigator	Badge Number	
F SIGNATURES				
I/We hereby certify under penalty of law that ALL information contained herein is TRUE and CORRECT and that I/we understand that any misstatement of fact is a misdemeanor of the third degree punishable by a fine up to \$2,500 and/or imprisonment up to 1 year (18 Pa.C.S. Section 4904[b]).				
Signature of Applicant or Authorized Person			Telephone Number	
Signature of Co-Applicant			Date	