

NOTICE OF PENDING LIEN SALE FOR VEHICLE VALUED \$4000 OR LESS

(Civil Code §3072)

LIEN SALE UNIT
P.O. BOX 932317
SACRAMENTO, CA 94232-3170

TO WHOM IT MAY CONCERN:

This is to notify you that I intend to sell this vehicle at a Lien Sale (public sale) because my towing, storage, or repair bill has not been paid. You may wish to take one of the following actions:

1. Pay my bill and reclaim the vehicle before the sale date.
2. Stop the sale and dispute the lien in court. You may stop the sale by completing the Declaration of Opposition below and forwarding this notice to the DMV in the enclosed envelope within 10 days of the date this notice was mailed.
3. Disregard this notice if you no longer own or want this vehicle so I can proceed with the sale. However, if you are the last owner of record, you may be liable for removal and disposition costs and lien not satisfied by sale of the vehicle.

VEHICLE DESCRIPTION	LICENSE NUMBER	STATE REGISTERED		LICENSE EXPIRATION DATE	VEHICLE IDENTIFICATION NUMBER (VIN)
	100	CA		09 24 18	jhbh876876
VEHICLE DESCRIPTION	MAKE	YEAR	MODEL	BODY TYPE	ENGINE NUMBER (MOTORCYCLES ONLY)
	MAKE	100	model	body type	afsd
INFORMATION ABOUT MY LIEN	DATE VEHICLE CAME INTO MY POSSESSION		DATE OWNER BILLED FOR SERVICES/STORAGE		DATE WORK OR SERVICES COMPLETED
	09 24 18		09 24 18		09 24 18
	MY TOWING AND STORAGE WAS AUTHORIZED BY A PUBLIC AGENCY <input type="checkbox"/> YES <input type="checkbox"/> NO				
INFORMATION ABOUT MY LIEN	The amount and basis for my lien and outstanding parking violation bail is:				
	STORAGE TO DATE	AT THE RATE OF	TOWING	REPAIRS	PARKING VIOLATIONS (CVC 22851.1)
	\$ 0	\$ 100 PER DAY	\$ 1200	\$ 100	\$ 100
INFORMATION ABOUT THE SALE	The vehicle will be available for inspection at least one hour prior to the sale.				
	DATE NOTICE OF SALE MAILED		DATE OF SALE		HOUR OF SALE
	09 24 18		09 24 18		11:00 <input checked="" type="checkbox"/> am <input type="checkbox"/> pm
INFORMATION ABOUT THE SALE	LOCATION OF SALE (STREET ADDRESS)		CITY		STATE ZIP CODE
	1305-A Gateview Ave		San Francisco		CA 43124
	I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct and I have no information or belief that there is a valid defense to the claim which gives rise to the lien.				
CERTIFICATION	DATE	SIGNATURE OF LIENHOLDER OR AGENT ACTING FOR LIENHOLDER			
	09 24 18	X			
	for IZ SERVICES				
	LIENHOLDER (NAME)		TELEPHONE NUMBER	BUREAU OF AUTOMOTIVE REPAIR NO.	
	casdcac		(310) -953-7845	100	
	ADDRESS		CITY	STATE	ZIP CODE
1305-A Gateview Ave		San Francisco	CA	43124	
CERTIFICATION	AGENT ACTING FOR LIENHOLDER (NAME)		TELEPHONE NUMBER	REGISTRATION SERVICE NUMBER	
	IZ SERVICES		(310) 527-2345	44362	
	ADDRESS		CITY	STATE	ZIP CODE
	3592 REDONDO BEACH BLVD		TORRANCE	CA	90504
	TO: DEPARTMENT OF MOTOR VEHICLES				
	Please stop the lien sale of this vehicle because I wish to contest the claim of the lienholder. I understand the lienholder may file an action in court and if judgment is given in his/her favor, I may be liable for the court costs. The address at which I may be served or notified in person of any court				
DECLARATION OF OPPOSITION	PRINT TRUE FULL NAME		TELEPHONE NUMBER		
			()		
	ADDRESS		CITY	STATE	ZIP CODE
DECLARATION OF OPPOSITION	MAILING ADDRESS IF DIFFERENT FROM ABOVE				
	I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
	DATE	SIGNATURE			
DECLARATION OF OPPOSITION		X			
	ATTENTION: This Declaration of Opposition will not be valid unless you have signed, provided your true full name, and a valid address. If the lienholder is unable to serve you with a court action, he/she will be allowed to continue with the lien sale (Civil Code 3072).				

NOTE TO THE LIENHOLDER:

This notice is to be sent to the registered owner, legal owner, Department of Motor Vehicles, and any other person interested in this vehicle, 31 to 41 days before the date of sale (do not count day notice mailed). Send notice certified mail, return receipt requested, or U.S. Postal Service Certificate of Mailing.

EXCEPTION: Notice to the department must be sent by certified mail, return receipt requested.

At least 10 days before the sale, a copy of this notice shall be posted in a conspicuous place on the premises of the business office of the lienholder, and if the sale occurs at a place other than the business office, a notice must be posted at the site of the forthcoming sale.

REGISTERED OWNER

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LEGAL OWNER

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Department of Motor Vehicles Lien Sale Unit P. O. Box 932317 Sacramento, CA 94232-3170

INTERESTED PARTIES

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**CERTIFICATION OF LIEN SALE
FOR VEHICLE VALUED \$4000 OR LESS
CIVIL CODE §3072**

LIEN SALE UNIT
P.O. BOX 932317
SACRAMENTO, CA 94232-3170

NOTE TO THE LIENHOLDER:

When a vehicle is sold at auction, immediately complete this form and give to the buyer. Retain a copy to submit to DMV with any excess fees. If the vehicle is not sold because a qualifying bid was not received, the lienholder becomes the buyer indicated on the Certification of Sale section. When the vehicle is sold in the future, complete a bill of sale and give both forms to the buyer. All registration fees and penalties become due and payable on the lien sale date. Following the sale of a vehicle, remove and destroy the vehicle's license plate(s), and within 5 days of sale, submit a completed Notice of Release of Liability (NRL) form to DMV.

VEHICLE DESCRIPTION	LICENSE NUMBER 100	STATE REGISTERED CA	LICENSE EXPIRATION DATE 09 24 18		VEHICLE IDENTIFICATION NUMBER (VIN) jhbh876876
	MAKE MAKE	YEAR 1000	MODEL model	BODY TYPE body type	ENGINE NUMBER (MOTORCYCLE ONLY) afsd
AUTHORITY TO CONDUCT LIEN SALE	DATE VEHICLE CAME INTO MY POSSESSION 09 24 18		DATE OWNER BILLED FOR SERVICES/STORAGE 09 24 18		DATE WORK OR SERVICES COMPLETED 09 24 18
	IF AUTHORIZED BY A PUBLIC AGENCY, OR PURSUANT TO VC § 22658, DATE VEHICLE WAS TOWED In accordance with Civil Code §3072, my authority to conduct this lien sale is: <input checked="" type="checkbox"/> After the Notices of Pending Sale were mailed to DMV, the registered/legal owners at their addresses of record with DMV, and any other person known to have an interest in the vehicle, the sale was conducted not less than 31 days or more than 41 days. I have not received notice from DMV prohibiting this lien sale. <input type="checkbox"/> A certified copy of the court judgment to proceed with the sale. <input type="checkbox"/> A release of interest from the opposer(s) after opposition filed. <input type="checkbox"/> Authorization from DMV after proof of unsuccessful service. <input type="checkbox"/> There is no record on file and no known interested parties. A total of 31-41 days have elapsed before the sale was conducted. Note: Vehicle record from DMV and/or a certified copy of the court judgement or release of interest (as appropriate) must be attached.				
NOTICE OF PENDING SALE	<input checked="" type="checkbox"/> In accordance with Civil Code §3072, Notices of Pending Sale with accompanying Declarations of Opposition were mailed to the registered and legal owners of record, interested parties, and DMV, 31 to 41 days prior to the lien sale. Note: Postal receipts or postal listing sheet must be attached.				
CERTIFICATE OF SALE	The above described vehicle was sold on: 09 24 18 <small>MONTH DAY YEAR</small>		BUYERS TRUE FULL NAME		
			ADDRESS		
	CITY		STATE		ZIP
THE AUCTION SALE AND PROCEEDS	NOTE TO LIENHOLDER: If vehicle retained by lienholder, complete number 2 only.				
	1. The vehicle was sold for:..... \$				
	2. The billing and costs were:				
	A. TOWING..... \$ <u>1200</u>				
	B. STORAGE..... \$ <u>0</u>				
	C. REPAIRS..... \$ <u>100</u>				
	D. COST OF SELLING (CANNOT EXCEED \$70) \$ <u>100</u>				
	TOTAL OF 2 (ADD A THROUGH D)..... \$ <u>1400</u>				
3. PARKING VIOLATIONS..... \$ <u>100</u>					
4. EXCESS FEES* (LINE 1 MINUS TOTAL OF 2 AND 3)..... \$					
*EXCESS FEES MUST BE SUBMITTED TO DMV WITH A COMPLETED COPY OF THIS FORM WITHIN 15 DAYS OF THE SALE DATE.					
CERTIFICATION	LIENHOLDER'S NAME (PRINT) casdcac				TELEPHONE NUMBER (310) -953-7849
	STREET ADDRESS 1305-A Gateview Ave		CITY San Francisco	STATE CA	ZIP 43124
	AGENT ACTING FOR LIENHOLDER (PRINT NAME) IZ SERVICES		REGISTRATION SERVICE NUMBER 44362	TELEPHONE NUMBER (310) 527-2345	
	STREET ADDRESS 3592 REDONDO BEACH BLVD		CITY TORRANCE	STATE CA	ZIP 90504
	I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.				
	DATE 09 24 18	LIENHOLDER'S OR AGENT'S (ACTING FOR LIENHOLDER) SIGNATURE for IZ SERVICES			

Name and Address of Sender

Check type of mail or service:

☐ Certified

☐ COD

☒ Delivery Confirmation

☐ Express Mail

☐ Insured

☐ Recorded Delivery (International)

☐ Registered

☐ Return Receipt for Merchandise

☐ Signature Confirmation

Affix Stamp Here

(If issued as a certificate of mailing, or for additional copies of this bill)

Postmark and Date of Receipt

Article Number	Addressee (Name, Street, City, State, & ZIP Code)	Postage	Fee	Handling Charge	Actual Value if Registered	Insured Value	Due Sender if COD	DC Fee	SC Fee	SH Fee	RD Fee	RR Fee
1.												
2.												
3.												
4.												
5.												
6.												
7.												
8.												
Total Number of Pieces Listed by Sender	Total Number of Pieces Received at Post Office	Postmaster, Per (Name of receiving employee)		See Privacy Act Statement on Reverse								

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Complete by Typewriter, Ink, or Ball Point Pen