



ABANDONED VEHICLE CHECKLIST

Vehicles are considered to be abandoned if left on Wyoming private property in excess of 30 consecutive days without the consent of the owner or person in lawful control of the property. Vehicles are also considered abandoned if left for repairs and not claimed 30 days after the date agreed upon by both parties.

This packet is also available at the local Sheriff's office.

Instructions:

1. **Obtain a Vin Inspection:** The vehicle must receive a vin inspection, which can be performed by local law enforcement. This must be performed on the Wyoming inspection form (MV – 300A), see attached.
2. **Title Search Results:** Once the vin is verified, you must locate the previous owner via the application for Vehicle Records and Privacy Disclosure Release (MV – 220), see attached. Mail your completed application to the address listed in STEP #6 and wait for a response from WYDOT in Cheyenne, Wyoming. This response will indicate any previous owner and/or lienholder, if applicable, for you to contact regarding the abandoned vehicle.
3. **Certified Letter:** You must send a certified letter to this last known owner and/or lienholder with a full description of the vehicle's year, make, model, vin number, any license plate number, the state in which the plates belong to, any amount of money claimed for expenses such as storage, removal, preservation, service, repair, or maintenance, and date, time, and place of sale. Please keep a photocopy of your letter and your receipts for proof that a 21-day waiting period has been served. In the instance that the last known owner and/or lienholder responds with a written statement that they no longer have any interest in the abandoned vehicle, our office may proceed to the next step without waiting the full 21-day waiting period.
4. **Submit Publication:** After your certified letter has been sent, you must submit a publication for two consecutive weeks with the full vehicle description. Please obtain a proof of the publication and that it was served for two consecutive weeks via a receipt and/or photocopies.
5. **Appraisal:** Our office must receive a written appraisal value for the abandoned vehicle. We accept appraisals utilizing NADA or JD Power, Kelley Blue Book, Price Digest, any local dealerships, or any company authorized to perform an appraisal.
6. **Certificate of Sale:** The last step is to receive a certificate of sale from the local Sheriff's office. The above information must be presented at this time as proof of compliance with Wyoming's requirements. Once the certificate is received, please bring all documents in to the Teton County Clerk's Office to apply for a vehicle title.

Checklist:

- ☐ WY Vin Inspection
- ☐ Title Search Results
- ☐ Copy of Letter and Proof of 21-Days
- ☐ Proof of Publication (2 Consecutive Weeks)
- ☐ Appraisal of Vehicle
- ☐ Certificate of Sale

STATE OF WYOMING
Application for Certificate of Title and VIN/HIN Inspection Form
(Proof of ownership **MUST** accompany application)

Motor Vehicle ☐ Trailer ☐ Snowmobile ☐ Watercraft ☐ Mobile Home ☐ Date Title Issued: _____

MANUFACTURER	YEAR	VEHICLE / HULL IDENTIFICATION NO.	NMVTIS	BODY STYLE		
FACTORY PRICE / MSRP	STATE	PRIOR TITLE NO.	ODOMETER	WEIGHT	PURCHASE DATE	VESSEL LENGTH
BRANDED TITLE INFORMATION –definitions and requirements are on the reverse side of this application.						
Does this motor vehicle currently have or ever had a branded title? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, what title brand? _____						
Has this motor vehicle been declared a total loss by an insurance company or sustained 75% damage of actual cash value? <input type="checkbox"/> Yes <input type="checkbox"/> No						
Printed Name of Person Completing this Section: _____ Signature: X _____						

PURCHASER / SELLER INFORMATION (Please print clearly)

NAME OF PURCHASER(S) _____ ☐ Joint Tenants With Rights of Survivorship?

ADDRESS _____ CITY _____ STATE _____ ZIP _____

NAME OF SELLER _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

LIEN INFORMATION (Please print clearly)

NAME OF LIEN HOLDER _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

LIEN FILING # _____ FILING DATE _____ LIEN AMOUNT _____

I/WE HEREBY SWEAR OR AFFIRM under penalty of perjury that all information on this application is true and correct and that I/we am/are lawfully applying for a Wyoming Certificate of Title. I/we further warrant that said vehicle is owned by me/us and is subject to the liens shown and none other. I/we further certify to the best of my/our knowledge that if the vehicle is a mobile home, all taxes due on the mobile home for the preceding and current year have been paid and in the event taxes have not been paid, acknowledge that I/we may be responsible for the taxes for the preceding and current year. Any false information may cancel the title and void any registration associated with the title.

PURCHASER SIGNATURE(S): **X** _____ **X** _____

~~~~~“VIN” or “HIN” Inspection Form~~~~~

**REQUIRED WHEN THE PRIOR TITLE IS FROM A STATE OTHER THAN WYOMING. NOT REQUIRED FOR MSO/MCO.**

**\*\* Before completing the V.I.N. or H.I.N. inspection, please review the “NOTICE” on the reverse side or this form to determine if you are authorized by statute to do so. Please print the vehicle/watercraft information as accurate and legible as possible and then verify with your signature at the bottom.**

**AUTHORIZED AGENT**

**PRINT VIN OR HIN HERE** \_\_\_\_\_

Vehicle Identification Number (VIN) typically contain 17 alpha-numeric characters and  
Hull ID Number (HIN) HIN's are required to have 10-14 but typically have 12 alpha-numeric digits, with no spaces or dashes.

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Trim: \_\_\_\_\_ VIN / HIN Verified With NCIC? **Yes / No**  
(Ford, Jeep, Chevy, Honda, etc.) (F-150, Camaro, Wrangler, etc.) (XLT, Lariat, GT, LS, Rubicon, etc.) (Circle One)

Subject to the penalties of perjury, I, \_\_\_\_\_ BADGE/TITLE/DLR NUMBER: \_\_\_\_\_ am

an authorized member or employee of, AGENCY or ENTITY NAME: \_\_\_\_\_

(Please Circle One) Police Dept. / Sheriff's Office / Highway Patrol / State Police / G&F / Other Entity: \_\_\_\_\_

depose and state that, I personally inspected the VIN or HIN in the state of \_\_\_\_\_ on the above described vehicle/watercraft and the information entered by me is true and correct. The undersigned verifies that I am authorized by the laws of Wyoming (or state where the inspection occurred), to conduct this inspection.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

W.S. 31-3-102(b) provides a \$10.00 fee for each vehicle identification number inspected, and one \$10.00 fee for inspection of a VIN and HIN at the same time, pursuant to W.S. 31-2-103(a)(vi).

**NOTICE:** The person conducting the VIN (vehicle) or HIN (watercraft) identification number inspection SHALL be authorized by their state statute regarding inspections of this nature. Any person who conducts a VIN or HIN inspection and is not lawfully authorized to do so shall be cause to void the title application and may void any title or registration issued that is related to this VIN or HIN inspection. In addition, YOU MAY BE SUBJECT TO CRIMINAL PENALTIES. (A VALID HIN on a watercraft is required to have 10-14 alpha-numeric digits but typically has 12, with no spaces or dashes.)

### Wyoming V.I.N. Inspection Statutes

W.S. 31-2-103. Contents of application; signature; vehicle identification number; issuance of certificate.

§ (vi) In the case of a vehicle registered or titled in a state other than Wyoming, or any homemade vehicle, rebuilt vehicle, reconstructed vehicle, any vehicle assembled from a kit or any vehicle for which a bond is required, a current statement made by a Wyoming law enforcement officer, or licensed Wyoming dealer only for vehicles in his inventory or possession, that the vehicle identification number on the vehicle has been inspected and that the inspection occurred in Wyoming and certifying the correct vehicle identification number displayed on the vehicle. Any licensed Wyoming dealer performing an inspection of a vehicle identification number under this section shall, in addition to the requirements of this act, do so pursuant to W.S. 31-11-108. In the case of a vehicle not in Wyoming, the vehicle identification number may be inspected and certified on a form approved by the department if the inspection is made by an authorized law enforcement officer of a city, county or state law enforcement agency or a commissioned officer at a federal military installation or any other person authorized to do so by law and delivered to the county clerk in the county where the application for certificate of title is made along with payment for the inspection fee required under W.S. 31-3-102(b)(iv);

(ix) Such other information as required by the department or county clerk which may include but not be limited to a vehicle bill of sale or similar document, any documentation necessary to verify proof of ownership including an affidavit for proof of ownership or any surety bond required by this act. Any affidavit for proof of ownership shall be prescribed pursuant to W.S. 31-1-201(d) and shall be utilized by each county of this state;

(x) A Wyoming certificate of title shall contain an appropriate notice whenever records readily accessible to the state indicate that the motor vehicle was previously issued a title or registration from any jurisdiction that bore any word or symbol signifying that the vehicle was "salvage", "unrebuildable", "parts only", "scrap", "junk", "nonrepairable", "reconstructed", "rebuilt" or any other symbol or word of like kind, or that it has been damaged by flood. Any information concerning a motor vehicle's status shall also be conveyed on any subsequent title issued for the vehicle by this state, including a duplicate or replacement title.

(d) Upon receipt of an application and payment of fees any county clerk shall, if satisfied that the applicant is the owner of the vehicle for which application for certificate of title is made, issue a paper certificate of title or electronic certificate of title, if available, upon a form or electronic format, approved by and provided at cost to the county clerk by the department in the name of the owner bearing the signature and seal of the county clerk's office. The county clerk shall not deliver a certificate of title issued under this section until presentation of a receipt for payment of sales or use tax pursuant to W.S. 39-15-107(b) or 39-16-107(b).

### Wyoming Salvage Statute Information

W.S. 31-2-107. Titles for damaged vehicles; return of certificate of title and registration for damaged vehicle; replacement title and registration.

§ (a) When a motor vehicle is declared a total loss by the insurance company or, in the event an insurance company is not involved in the settlement of the claim, sustains damage in an amount exceeding seventy-five percent (75%) of its actual retail cash value, as set forth in any current edition of a nationally recognized automotive appraisal guide or other source approved by the Wyoming insurance department, the owner or insurance company, if it obtains ownership of the vehicle through transfer of title as a result of a settlement of an insurance claim, shall forward the properly endorsed certificate of title to the office of the county clerk that issued the certificate of title together with an application for a certificate of title branded salvage and payment of the fee required under W.S. 31-3-102(a)(vii) to obtain a properly branded certificate of title. When any vehicle accident report is required under chapter 5, article 11 of this title, the investigating officer shall provide written notice to the owner or operator of the vehicle of the requirements under this section.

(d) This section shall not apply to motor vehicles with more than eight (8) years of service except any vehicle that was previously issued a title from any state that bore any word or symbol signifying that the vehicle was "salvage", "unrebuildable", "parts only", "scrap", "junk", "nonrepairable", "reconstructed", "rebuilt" or any other symbol or word of like kind, or that it has been damaged by flood, shall obtain a Wyoming title with the prior brand or any other information concerning the motor vehicle status, carried forward on any subsequent Wyoming title regardless of years of service.


# APPLICATION FOR ABANDONED VEHICLE IDENTIFICATION REQUEST OR VEHICLE RECORD AND PRIVACY DISCLOSURE RELEASE



|                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                    |                                     |                 |
|----------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-------------------------------------|-----------------|
| <b>STEP #1</b>             | <b>APPLICANT AND VEHICLE INFORMATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                    |                                     |                 |
|                            | Requester/Applicant or Business Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                                    | Daytime Phone                       | Email Address   |
|                            | Mailing Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                    | City                                | State      ZIP  |
|                            | Vehicle Make                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | Year                                               | VIN                                 |                 |
|                            | Model                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Body Style                                         | Color                               |                 |
|                            | License Plate No. w/Exp. Date <i>(If Applicable)</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | State License Plate is from <i>(If Applicable)</i> | Title # <i>(If Applicable)</i>      |                 |
| Owner Name (If Applicable) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                    |                                     |                 |
| <b>STEP #2</b>             | <b>TYPE OF APPLICATION-IF UNSURE PLEASE CALL YOUR COUNTY CLERK AND DESCRIBE YOUR SITUATION</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                    |                                     |                 |
|                            | <input type="checkbox"/> <b>BONDED</b> - You bought a vehicle and are unable to obtain a title- <b>PROCEED TO STEPS 4, 5 AND 6</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                    |                                     |                 |
|                            | <input type="checkbox"/> <b>STORAGE/MECHANIC LIEN SALE</b> - You have a verbal or written agreement with a vehicle owner resulting in an unpaid bill- <b>PROCEED TO STEPS 4, 5 AND 6</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                    |                                     |                 |
|                            | <input type="checkbox"/> <b>ABANDONED-<u>IN WYOMING ONLY!</u></b> - The vehicle was left unattended on private property <b><u>IN WYOMING</u></b> , without the express consent of the owner for at least 30 days. <b>COMPLETE STEP 3 THEN PROCEED TO STEPS 5 AND 6</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                    |                                     |                 |
|                            | <input type="checkbox"/> <b>OTHER</b> Please check the appropriate box in Step #4 on the back of this form <b>THEN PROCEED TO STEPS 5 AND 6</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                    |                                     |                 |
| <b>STEP #3</b>             | <b>WYOMING ABANDONED VEHICLE INFORMATION</b> <small>(Complete only if you have checked "Abandoned" above)</small>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                    |                                     |                 |
|                            | Address where the vehicle was abandoned                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                    | City                                | State      ZIP  |
|                            | Describe how the vehicle came into your possession                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                    | Date vehicle was abandoned or towed |                 |
|                            | <b>IF VEHICLE WAS MOVED TO ANOTHER LOCATION, PLEASE COMPLETE BELOW</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                    |                                     |                 |
|                            | Name of Person who removed the vehicle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                    | Date of Removal                     | Time of Removal |
|                            | Mailing Address where vehicle is currently located                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                    | City                                | State      ZIP  |
|                            | <p>*The above described vehicle has been abandoned on my private property or towed by my company and left in excess of 30 consecutive days. I understand Wyoming statue 31-13-109 can only be used when a vehicle is abandoned without the consent of the owner or person in lawful control of the property for 30 days after the date agreed upon by both parties. <b>I understand vehicles purchased without clear title and vehicles left with consent cannot be processed as abandoned</b>, as there is no provision for expiration of consent. I understand the department is vested only with the responsibility of making reasonable efforts to identify the vehicle's owner and any lien holder of record and forward the information obtained.</p> |                                                    |                                     |                 |
|                            | Was the vehicle tagged by law enforcement? <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                    |                                     |                 |

**TURN OVER**



|                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
|----------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|
| <b>STEP #4</b>                                           | <b>REASON FOR REQUEST</b> (Complete if you have checked any purpose other than "Abandoned")                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
|                                                          | <div style="display: flex; flex-direction: column; gap: 10px;"> <div><input type="checkbox"/> Government agency, court or law enforcement agency in carrying out its normal functions.</div> <div><input type="checkbox"/> <b><u>BONDED TITLE or</u></b>-Private person or entity acting on behalf of a government agency in carrying out its normal functions.</div> <div><input type="checkbox"/> For use in matters of driver/vehicle safety, theft, emissions, product alterations, recalls, or advisories, performance monitoring of motor vehicles, parts and dealers, market research activity, survey research and removal of non-owner records from the original owner records of motor vehicle manufacturers.</div> <div><input type="checkbox"/> <b><u>STORAGE/MECHANIC LIEN SALE or</u></b>-Normal course of business by a legitimate business or its agents, employees or contractors but only to verify the accuracy of personal information submitted by the individual to the business or its agents, employees or contractors; and if such information as so submitted is not corrected or is no longer correct, to obtain the correct information but only for purposes of preventing fraud by, pursuing legal remedies against, or recovering on a debt or security interest against the individual.</div> <div><input type="checkbox"/> Use in connection with any civil, criminal, administrative, or arbitral proceedings in any court or government agency or before any self-regulatory body, including the service of process, investigation in anticipation of litigation, and the execution or enforcement of judgments and orders, or pursuant to an order of any court.</div> <div><input type="checkbox"/> Use in research activities and for use in producing statistical reports, so long as the personal information is not published, re-disclosed, or used to contact individuals.</div> <div><input type="checkbox"/> Use in providing notice to the owners of towed impounded vehicles.</div> <div><input type="checkbox"/> Use by a licensed private investigative agency or licensed security for any purpose permitted under this section. (Must present or enclose photocopy of state issued investigative license and must specify use.)</div> <div><input type="checkbox"/> Use by employers or its agent/insurer to obtain/verify information required under the Commercial Motor Vehicle Safety Act of 1986 relating to a holder of a commercial driver's license.</div> <div><input type="checkbox"/> Use in connection with the operating of private toll transportation facilities.</div> <div><input type="checkbox"/> Bulk distribution for surveys, marketing, or solicitations if the Department has obtained the express consent of the person to whom such personal information pertains.</div> <div><input type="checkbox"/> Any other use specifically authorized by law that is related to the operation of a motor vehicle or public safety. Must specify use _____</div> </div> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
| <b>STEP #5</b>                                           | <p>To receive Wyoming motor vehicle records, the requestor must properly complete this form indicating the business need for information requested. <b>Resale or disclosure of any information received as a result of this release is prohibited.</b></p> <p>I hereby swear or affirm under penalty of perjury that all information on this application is true and correct. I will not resell or disclose information obtained pursuant to this release to any third party clients.</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
|                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | <p><b>THE REQUEST WILL NOT BE PROCESSED IF THE FOLLOWING ITEMS ARE NOT INCLUDED:</b></p> <ul style="list-style-type: none"> <li>✓ The completed search request form</li> <li>✓ A copy of a VIN Inspection on the vehicle by law enforcement (if the vehicle is in your possession) <b><i>**Do not send the original inspection—it will not be returned**</i></b></li> <li>✓ A copy of a government-issued photo ID for the signer of the request</li> <li>✓ A <b>\$5.00</b> search fee, payable to WYDOT</li> <li>✓ <b>IF YOU ARE ATTEMPTING TO TITLE OR REGISTER A VEHICLE IN A STATE OTHER THAN WYOMING</b>, documentation from your state's DMV that a Wyoming record search is required as a part of the title/registration process</li> </ul> |      |
|                                                          | Signature of Applicant                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Date |
| <b>STEP #6</b>                                           | <p><b><u>APPLICANT SHALL MAIL THIS APPLICATION ALONG WITH ALL REQUIRED DOCUMENTS AND \$5.00 FEE TO:</u></b></p> <p style="text-align: center;">WYDOT, ATTN: Motor Vehicle Services, 5300 Bishop Blvd., Cheyenne, Wyoming 82009-3340</p> <p style="text-align: center;"><b>FOR ADDITIONAL INFORMATION PLEASE CALL: 307-777-4709</b></p> <p style="text-align: center;">or email <a href="mailto:mvsplates@wyo.gov">mvsplates@wyo.gov</a></p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
| <b>FOR WYOMING DEPARTMENT OF TRANSPORTATION USE ONLY</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |      |
| Approved                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Completed By                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Date |

# NOTICE OF SALE / INTENT TO SELL

Date: \_\_\_\_\_

To: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dear \_\_\_\_\_,

I am contacting you because you are the last known titled/registered owner of the below vehicle:

Year: \_\_\_\_\_ Vin #: \_\_\_\_\_

Make: \_\_\_\_\_ Model: \_\_\_\_\_

I am contacting you regarding the vehicle that has been abandoned for at least 30 consecutive days on my property. If you are unable or unwilling to take your vehicle within 21 days of this notice, I will apply for a Wyoming Certificate of Title in Teton County, Wyoming, **or** I have intentions to sell the vehicle via public auction in the State of Wyoming. The vehicle may be sold by the owner or person in lawful control of the property at public auction to the highest bidder or may be sold following an action filed pursuant to W.S. 31-13-112(e).

Thank you,

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_