



## Out of State Vehicle Verification Form

**THIS FORM MUST BE COMPLETED BY A DULY CONSTITUTED FEDERAL, STATE, COUNTY, OR CITY LAW ENFORCEMENT OFFICER OR AUTHORIZED CAMPUS POLICE/SECURITY OR MILITARY OFFICER.**

This statement is to certify that on this \_\_\_\_\_ (day) of \_\_\_\_\_ (month), 20\_\_\_\_ (year). I have made a physical/visual inspection of the vehicle identified below.

### Vehicle Owner's Name

### Vehicle Identification

VIN

Year

Make

Model

License Plate

Year/State Issued

### Location of Inspection

Address

City

State

Zip Code

Zip Code Plus

### Inspecting Officer

Name

Badge Number

Signature

Telephone Number (include area code)

Agency Name

Please place the agency official stamp or business card in the box to the left.



**(Required)**