



VERIFICATION OF VEHICLE NOT TO BE COMPLETED BY APPLICANT

To be acceptable by DMV this form must be legible and completed **IN FULL** by an authorized DMV representative, California licensed vehicle verifier, authorized auto club employee, or peace officer who has been properly trained to perform vehicle verifications, **while PHYSICALLY inspecting complete and assembled vehicles**. See reverse for additional information and verifier restrictions.

WARNING: Any missing sections, alterations, cross-outs, or erasures (even when initialed) will void this form and a new verification must be completed. Mark all areas/sections which do not apply as non-applicable (N/A); do not leave blank. All numbered sections (1-9) below must have at least one box checked in each section. The vehicle may also be subject to verification by the California Highway Patrol (CHP).

| | | | | | | |
|--|----------------------------|-------|-------------------------------|--|------------------------------------|--|
| LICENSE PLATES ON VEHICLE: <input checked="" type="checkbox"/> None <input type="checkbox"/> Dealer <input type="checkbox"/> Temporary Permit | LICENSE PLATE NUMBER | STATE | EXPIRATION DATE | NUMBER OF AXLES 3 | MOTIVE POWER (FUEL) D | FOR OHVs <input type="checkbox"/> Complying <input type="checkbox"/> Non-complying |
| VEHICLE IDENTIFICATION NUMBER (VIN) 4 Y 4 N C 9 E H X N N 2 7 1 1 6 2 | | | | CATEGORY (CHECK BOX) <input type="checkbox"/> Automobile <input type="checkbox"/> Permanent Trailer ID (PTI) <input type="checkbox"/> Motorcycle (Street) <input checked="" type="checkbox"/> Commercial <input type="checkbox"/> Trailer Coach (CCH) <input type="checkbox"/> Off-Highway (OHV) | | |
| ENGINE NUMBER (MOTORCYCLES (M/C) AND OHVs ONLY) (FOR ELECTRIC M/C, USE ELECTRIC MOTOR NO.) | | | | BODY TYPE MODEL (BTM) DS | | MODEL YEAR 2022 |
| MAKE Volvo | MODEL OR SERIES VNL 760 | | GVWR WEIGHT (PICKUPS) LBS. | NO. WHEELS 10 | EST. WEIGHT (PTI TRAILERS) LBS. | FOR CAMP/COACH TRAILERS/MOTORHOMES Length Width |

1) VIN Location:

- ☐ Visible through windshield ☐ Door Frame/Door Post
☒ Body—Left (driver side) ☐ Steering Column
☐ Body—Right ☐ Firewall
☐ Engine compartment ☐ Other:

2) Attached by:

- ☐ Not visible ☒ Adhesive
☐ Rosette rivets ☐ Not applicable
☐ Round rivets ☐ Screws
☐ Other: ☐ Stamped

3) Type:

- ☐ Metal plate ☒ Label
☐ Stamped on body
☐ Stamped on frame
☐ Other:

4) VIN/Engine Number: (IF MOTORCYCLE, MARK BOTH VIN AND ENGINE (ENG) BOXES)

- | | | | |
|--|---|--|--|
| VIN ENG | VIN ENG | VIN ENG | VIN ENG |
| <input checked="" type="checkbox"/> Appears okay | <input type="checkbox"/> Illegible/Damaged* | <input type="checkbox"/> Cannot locate* | <input type="checkbox"/> Assigned by F/O |
| <input type="checkbox"/> Altered/Tampered* | <input type="checkbox"/> Missing* | <input type="checkbox"/> None—Newly built* | <input type="checkbox"/> See REMARKS |

5) Model Year Determined From:

- ☒ 10th Digit of VIN (1980 & Newer)
☐ NATB/NICB Book/Manual: (Page #)
☐ Other—See REMARKS

6) US Federal Certification Label Status:

- ☒ Agrees with VIN ☐ Missing/None*
☐ Disagrees with VIN* ☐ Pre-1970
☐ Illegible/Damaged* ☐ See REMARKS
☐ Altered/Tampered*

US Federal Certification Label Indicates: (REQUIRED FOR 1970 AND NEWER MODEL YEARS—NOT FOR OHVs)

- ☒ Vehicle complies with US Federal Motor Vehicle Safety Standards (US FMVSS)
☐ Name of vehicle importer (enter name of importer in "REMARKS" below)
☐ Vehicle complies with safety requirements of a country other than US
☐ Compliance with Low-Speed Vehicle (LSV) requirements

7) ODOMETER MILEAGE READING

(NOT REQUIRED FOR OHV/LSV)

Record mileage exactly as shown on vehicle odometer.

If NONE, check this box ☐ and draw line through boxes.

4 1 5 3 4 1 . 10 (no tenths)

- ☒ miles ☐ 5-digit odometer
☐ kilometers ☐ 6-digit odometer
☒ digital display

8) Supporting Ownership Document (IF NONE, CHECK THIS BOX ☐ VIN on vehicle was physically compared to:

- Type: ☒ Certificate of Title ☐ MSO/MCO ☐ Salvage Certificate ☐ US Government SF 97-1 ☐ Registration Card
Condition: ☒ Agrees with VIN ☐ Disagrees with VIN ☐ See REMARKS

9) Emission Label Indicates: (ALL VEHICLES—1968 AND NEWER MODEL YEARS, MOTORCYCLES—1978 AND NEWER MODEL YEARS, HEAVY-DUTY VEHICLES—1979 AND NEWER MODEL YEARS, OHVs—2003 AND NEWER MODEL YEARS)

- ☐ Vehicle meets US EPA standards only ☐ Vehicle meets California standards for Off Highway Vehicles (OHV)
☒ Vehicle meets US EPA standards and California standards ☐ Vehicle meets California standards for on-road and OHV (Dual Sport M/C)
☐ Vehicle meets California standards only ☐ Engine displacement less than 50 cc (cubic centimeters)
☐ Vehicle is Exempt (Former Military Vehicle—OHV Use Only) ☐ SORE Label (OHV-TCS Referral) ☐ See REMARKS ☐ None

REMARKS

EMISSION LABEL TEST GROUP OR ENGINE FAMILY NUMBER

MVPTH12.8601

FOR BTM VARIED (VA) DESCRIBE VEHICLE: (e.g., PK over 11,499 GVWR)

☐ DO NOT PROCESS - *REFER TO CHP

Door Replaced ☐ Air Bag Missing ☐

VERIFIER NAME (PLEASE PRINT)

RICHARD K MANN

ADDRESS

10175 CHERRY AVE FONTANA CA

CITY

STATE

CITY

STATE

TITLE/ID/BADGE/VV LICENSE NUMBER

VV19661

DAYTIME TELEPHONE NUMBER

(909) 720-9307

PHYSICALLY VERIFIED AT (CHECK BOX):

- ☒ Above address
☐ Other (specify):

VERIFYING AGENCY (CHECK BOX): ☒ CA Licensed Vehicle Verifier (VV) ☐ Auto Club ☐ Peace Officer (List Employer) Out of Country Vehicle: ☐ DMV ☐ CHP

STATEMENT OF FACTS — IDENTIFICATION NUMBER OR ENGINE NUMBER ERROR — I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct. I further certify that I am the owner of the above described vehicle and had no knowledge of the difference in the identification or engine number on the vehicle and titling documents.

VEHICLE OWNER'S SIGNATURE

PRINTED NAME

DATE

I certify that today I physically examined the vehicle described above and I find the description of the vehicle to be as indicated. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

VERIFIER SIGNATURE (STAMPED/TYPED SIGNATURE WILL NOT BE ACCEPTED)

EXECUTED AT (PLACE SIGNED - CITY, STATE) (REQUIRED)

DATE (REQUIRED)

X R Mann

Fontana CA

9-3-25

VERIFIER'S EMAIL ADDRESS

rmann@arrowtruck.com