



VERIFICATION OF VEHICLE NOT TO BE COMPLETED BY APPLICANT

To be acceptable by DMV, this form must be legible, hand printed in black or blue ink, 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 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) 3A1K1JH1H1D1R161L1S1L1P111247					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 2020
MAKE FORD	MODEL OR SERIES CASCADIA		GVWR WEIGHT (PICKUPS) LBS.	NO. WHEELS 10	EST. WEIGHT (PTI TRAILERS) LBS.	FOR CAMP/COACH TRAILERS/MOTORHOMES Length _____ Width _____	
1) VIN Location: <input type="checkbox"/> Visible through windshield <input checked="" type="checkbox"/> Body—Left (driver side) <input type="checkbox"/> Body—Right <input type="checkbox"/> Engine compartment		<input type="checkbox"/> Door Frame/Door Post <input type="checkbox"/> Steering Column <input type="checkbox"/> Firewall <input type="checkbox"/> Other: _____		2) Attached by: <input type="checkbox"/> Not visible <input type="checkbox"/> Rosette rivets <input type="checkbox"/> Round rivets <input type="checkbox"/> Other: _____		<input checked="" type="checkbox"/> Adhesive <input type="checkbox"/> Not applicable <input type="checkbox"/> Screws <input type="checkbox"/> Stamped	
3) Type: <input type="checkbox"/> Metal plate <input checked="" type="checkbox"/> Label <input type="checkbox"/> Stamped on body <input type="checkbox"/> Stamped on frame <input type="checkbox"/> Other: _____					4) VIN/Engine Number: (IF MOTORCYCLE, MARK BOTH VIN AND ENGINE (ENG) BOXES) 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: <input checked="" type="checkbox"/> 10 th Digit of VIN (1980 & Newer) <input type="checkbox"/> NATB/NICB Book/Manual: (Page #) <input type="checkbox"/> Other—See REMARKS							
6) US Federal Certification Label Status: <input checked="" type="checkbox"/> Agrees with VIN <input type="checkbox"/> Missing/None* <input type="checkbox"/> Disagrees with VIN* <input type="checkbox"/> Pre-1970 <input type="checkbox"/> Illegible/Damaged* <input type="checkbox"/> See REMARKS <input type="checkbox"/> Altered/Tampered*		US Federal Certification Label Indicates: (REQUIRED FOR 1970 AND NEWER MODEL YEARS – NOT FOR OHVs) <input checked="" type="checkbox"/> Vehicle complies with US Federal Motor Vehicle Safety Standards (US FMVSS) <input type="checkbox"/> Name of vehicle importer (enter name of importer in "REMARKS" below) <input type="checkbox"/> Vehicle complies with safety requirements of a country other than US <input type="checkbox"/> 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 <input type="checkbox"/> and draw line through boxes.		414991		10 (no tenths)		<input checked="" type="checkbox"/> miles <input type="checkbox"/> 5-digit odometer <input type="checkbox"/> kilometers <input type="checkbox"/> 6-digit odometer <input checked="" type="checkbox"/> digital display	
8) Supporting Ownership Document (IF NONE, CHECK THIS BOX <input type="checkbox"/> VIN on vehicle was physically compared to: Type: <input checked="" type="checkbox"/> Certificate of Title <input type="checkbox"/> MSO/MCO <input type="checkbox"/> Salvage Certificate <input type="checkbox"/> US Government SF 97-1 <input type="checkbox"/> Registration Card Condition: <input checked="" type="checkbox"/> Agrees with VIN <input type="checkbox"/> Disagrees with VIN <input type="checkbox"/> 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) <input type="checkbox"/> Vehicle meets US EPA standards only <input checked="" type="checkbox"/> Vehicle meets US EPA standards and California standards <input type="checkbox"/> Vehicle meets California standards only <input type="checkbox"/> Vehicle is Exempt (Former Military Vehicle – OHV Use Only) <input type="checkbox"/> Vehicle meets California standards for Off Highway Vehicles (OHV) <input type="checkbox"/> Vehicle meets California standards for on-road and OHV (Dual Sport M/C) <input type="checkbox"/> Engine displacement less than 50 cc (cubic centimeters) <input type="checkbox"/> SORE Label (OHV-TCS Referral) <input type="checkbox"/> See REMARKS <input type="checkbox"/> None							
REMARKS					EMISSION LABEL TEST GROUP OR ENGINE FAMILY NUMBER KDDXH14.8EAD		
<input type="checkbox"/> DO NOT PROCESS - *REFER TO CHP					FOR BTM VARIED (VA) DESCRIBE VEHICLE: (e.g., PK over 11,499 GVWR)		
VERIFIER NAME (PLEASE PRINT) COREY GARLAND					TITLE/ID/BADGE/VV LICENSE NUMBER VV14030		
ADDRESS 14525 MANZANITA DR, FONTANA, CA					DAYTIME TELEPHONE NUMBER (909) 573-5614		
CITY FONTANA					STATE CA		
PHYSICALLY VERIFIED AT (CHECK BOX): <input checked="" type="checkbox"/> Above address <input type="checkbox"/> Other (specify): _____							
VERIFYING AGENCY (CHECK BOX): <input checked="" type="checkbox"/> CA Licensed Vehicle Verifier (VV) <input type="checkbox"/> Auto Club <input type="checkbox"/> Peace Officer (List Employer) Out of Country Vehicle: <input type="checkbox"/> DMV <input type="checkbox"/> 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.					EXECUTED AT (PLACE SIGNED - CITY, STATE) (REQUIRED) FONTANA, CA		DATE (REQUIRED) 4/17/25
VERIFIER SIGNATURE (STAMPED/TYPED SIGNATURE WILL NOT BE ACCEPTED) 							