

## Non-Use of Vehicle

Owner Information						
Last Name			First Name		Middle Initial	
Legal Address						
City			State		ZIP	
Mailing Address						
City			State		ZIP	
Date of Birth			Driver License Number			
Vehicle Information						
Make			Model		Year	
Vehicle Identification Number (VIN)			Plate Number			
Period Of Non-Use						
<input type="checkbox"/> Vehicle is not being operated by the owner and the owner shall not permit any other person to operate the vehicle during the following time period.	Cannot Exceed 12 Months					
	From			To		
	Month	Day	Year	Month	Day	Year
<i>I certify, under penalty of perjury, that the above statements are true and accurate to the best of my knowledge.</i>						
Signature					Date	

**NOTE: This affidavit must be completed annually.**

Please return this form to the County Clerk in the county of your permanent residence.