

Non-Use of Vehicle

Owner Information

First Name	Middle Initial	Last Name
Legal Street Address		
City	State	ZIP Code
Mailing Street Address		
City	State	ZIP Code
Date of Birth	Driver License Number	

Vehicle Information

Vehicle Identification Number (VIN)															
Year	Make	Model		Plate Number											

Period Of Non-Use

☐ 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	Month	Day	Year
To	Month	Day	Year

I certify, under penalty of perjury in the second degree, that the above facts are true and accurate to the best of my knowledge.

Signature	Date (MM/DD/YY)

NOTE: This affidavit must be completed annually.

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