

**OFFICIAL REPORT OF STORED VEHICLE
OUT OF STATE FACILITIES OWNER/LIENHOLDER REQUEST FORM**

LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF MOTOR VEHICLES
PERSONALIZED PLATE AND STORED VEHICLE UNIT
P. O. BOX 64886
BATON ROUGE, LA 70896-4886

DESCRIPTION OF VEHICLE BEING STORED

VIN #

YEAR	MAKE	MODEL	BODY STYLE	LICENSE PLATE #	STATE	EXP DATE
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General Condition of Vehicle : (Must mark one)	
<input type="checkbox"/>	Running Condition
<input type="checkbox"/>	Not Running
<input type="checkbox"/>	Wrecked
<input type="checkbox"/>	Phone number. of Storage/Repair Facility only: ()
<input type="checkbox"/>	Fax number of Storage/Repair Facility only: ()
<input type="checkbox"/>	FEES: \$10.00 CHECK, CASHIER'S CHECK, OR MONEY ORDER MADE OUT TO "LOUISIANA OFFICE OF MOTOR VEHICLES"

NAME OF STORAGE/REPAIR FACILITY (PLEASE PRINT OR TYPE)	CONTACT PERSON AT STORAGE/REPAIR FACILITY
MAILING ADDRESS OF STORAGE/REPAIR FACILITY	PHYSICAL ADDRESS OF STORAGE/REPAIR FACILITY
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE

DPSMV 4219 (R 06/07)

ORIGINAL