



Justice of the Peace Request for Review Prior to Judgment

Louisiana Department of Public Safety, Office of Motor Vehicles
PO Box 64886, Baton Rouge, LA 70896-4886

Prior to the issuance of a Judgment, it is required to fax the following information for a title search to be performed. Please print or write legibly. All requests may be faxed to (225) 925-7059 or may be mailed to the above address.

1. Name of Applicant (owner in possession): _____
2. Date the vehicle was acquired: _____
3. Physical address of the applicant: _____
City: _____ State: _____ Zip: _____

4. Seller/Entity from whom the vehicle was acquired (include the address if available):
Seller Name: _____
Physical Address of the seller: _____
City: _____ State: _____ Zip: _____

Does the seller possess proof of his/her ownership confirming their authority to sell this vehicle? _____ Yes _____ No If yes, fax documentation with this request form.

5. Nature/History of the acquisition, including a thorough explanation of the circumstances as to why the proper documentation is not available. Check all that apply:

- ___ Applicant does not possess a Bill of Sale.
- ___ The Seller provided a Bill of Sale only, which is attached.
- ___ No longer in contact with the seller.
- ___ Seller never mentioned where title was last issued.
- ___ Titled owner contacted but would not cooperate in applying for a duplicate title (may require certified letter).
- ___ Dealership is no longer in business, contacted Used Motor Vehicle Commission (correspondence is attached)
- ___ Promised a title but the Seller never surrendered it.
- ___ Other (requires explanation): _____

6. Complete description of the vehicle **(Incomplete information may prevent the Office of Motor Vehicles from locating the correct record.)**

Vehicle Identification Number (VIN): _____
Make: _____ Model: _____ Year: _____

7. Consideration (Monies, etc.) involved must be indicated: _____

8. Vehicle must be lien free or, if a lien has been recorded on the title, you must submit a lien release from the recorded lien holder.

___ Vehicle is lien free. ___ Lien Release is attached.

9. Affidavit of Physical Inspection conducted by a post certified commissioned law enforcement officer was performed. ___ Physical Inspection Affidavit is faxed with this Request Form.

Justice of the Peace's Name: _____

Address: _____

Ward: _____ **Parish:** _____

Fax Number: _____ **Phone Number:** _____

Email Address: _____ **Date:** _____