## STATE OF CONNECTICUT DEPARTMENT OF MOTOR VEHICLES SPECIALIZED REGISTRY SERVICES



## **INSTRUCTIONS:**

- A list of all motor vehicles received must be submitted twice monthly to the Department of Motor Vehicles, per C.G.S. 14-67m(a). 1. FIRST REPORT: Due by the 20th of each month to cover the first 15 days of the current month. SECOND REPORT: Due by the 5th of each month to cover the 16th through the last day of the previous month.
- Surrendered CERTIFICATE OF TITLES must accompany this list. A Title vehicle must not be received unless the Title is surrendered with the vehicle. 2. A report is required for each reporting period even if no vehicles were received. 3.
- Indicate the type of ownership document used by abbreviating the type of document received: 4.
- T-Title, A-Aba Paper, B-Bill of Sale (pre 1970 Vehicles), H-H-109 Form, D-H-6B Lost or Duplicate Title.

## TO: Department of Motor Vehicles, Specialized Registry Services, 60 State Street, Wethersfield, Connecticut 06161-1022

REPORTING PERIOD (Check one)		t (1st) thru fifteenth (15th) eenth (16th) thru last day o		Check ( Ö ) if no vehicles were received during this reporting period.
BUSINESS	BUSINESS NAME (As appears on Recycler's License)			ICENSE NUMBER
INFORMATION	BUSINESS ADDRESS		TELEPHONE NUMBER	
MAKE OF VEHICLE	YEAR	ENGINE NUMBER (if any)	VEHICLE IDENTIFICATION NUMB	ER OWNERSHIP DOCUMENT STATE
SIGNATURE OF AUTHORIZED OFFICIAL (Service Manager or Designee)			TITLE OF AUTHORIZED OFFICIAL	DATE SIGNED