State of New Hampshire
Department of Safety
Division of Motor Vehicles
Bureau of Title and Anti-Theft
Concord, N.H. 03305  (603) 227-4150

Elizabeth A. Bielecki
Director of Motor Vehicles

VERIFICATION OF VEHICLE IDENTIFICATION

This is to certify that I have physically examined at ______________________, N.H., the vehicle described herein:

Year __________ Make __________ Model __________ Body Style __________ GVW __________ Owner’s Reg. No. __________

and found the vehicle identification number to be ____________________________

The vehicle identification number appears to be □ Altered □ Unaltered □ Changed □ Missing

Owner of Vehicle __________________________ Address __________________________

I further certify that the above referred to Vehicle Identification Number was not obtained from any registration or documents relative to this vehicle and was obtained by a visual inspection of the Public V.I.N. Plate. Any alterations to the information contained in this form shall make it invalid.

By __________________________ Agent’s Signature __________________________ Date __________

Agent’s Printed Name __________________________

This application is signed under penalty of unsworn falsification pursuant to RSA 641:3.

This form shall only be completed in its entirety by the authorized agents listed below:

Authorized N.H. Licensed Auto Dealer Plate # __________________________ Agency __________________________

Authorized N.H. Inspection Station # __________________________ Address __________________________ Tel. No. __________________________

Authorized Agent of the Director __________________________

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