



ALABAMA DEPARTMENT OF REVENUE

MOTOR VEHICLE DIVISION

P.O. Box 327640 • Montgomery, AL 36132-7640

www.revenue.alabama.gov

MVT 41-1

Doc Code MVT51C

2/21

Application For Salvage Certificate of Title

This application may be used by an individual or company to report a vehicle as being salvage. The outstanding properly assigned certificate of title must be submitted along with this application for processing.

VEHICLE INFORMATION section with fields for VIN, CYLS, DATE OF PURCHASE, NUMBER LIENS, COLOR, ODOMETER READING, TRANS CODE 10, YEAR MODEL, MAKE, MODEL, and CURRENT ALABAMA TITLE NO.

OWNER INFORMATION section with fields for NAME(S), CURRENT MAILING ADDRESS, CITY, STATE, ZIP, and checkboxes for odometer disclosure options.

FIRST LIEN section with fields for NAME, ADDRESS, CITY, STATE, ZIP, and LIEN DATE.

SECOND LIEN section with fields for NAME, ADDRESS, CITY, STATE, ZIP, and LIEN DATE.

OWNER(S) AUTHORIZATION FOR SPECIAL MAILING section with fields for NAME, ADDRESS, CITY, STATE, ZIP.

DEPARTMENT USE ONLY section with checkboxes for ACTUAL MILEAGE, EXCEEDS MECHANICAL LIMITS, and NOT ACTUAL MILEAGE - WARNING, ODOMETER DISCREPANCY.

Section A: In accordance with Section 32-8-87, Code of Alabama 1975, the motor vehicle described above was determined to be a salvage vehicle on the ... day of ... CITY/STATE WHERE TOTAL LOSS OCCURRED ... CHECK THE BLOCK IF TOTAL LOSS WAS DUE IN PART TO WATER DAMAGE ... \*\*A VEHICLE THAT IS JUNK OR SOLD FOR PARTS ONLY CAN NOT BE REBUILT OR RETITLED IN ALABAMA.

Section B: NAME AND ADDRESS OF INSURANCE CO. AND ADJUSTING CO. (IF ANY) ... NAME OF COMPANY, STREET ADDRESS, CITY, STATE, ZIP, ADJUSTER'S NAME, TELEPHONE NUMBER, INSURANCE COMPANY CLAIM OR POLICY NUMBER ... I, THE UNDERSIGNED, CERTIFY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT ... THE VEHICLE DESCRIBED ABOVE WAS DECLARED A TOTAL LOSS, COMPENSATION PAID THE OWNER BY THE ABOVE NAMED INSURANCE COMPANY AND SAID INSURANCE COMPANY HEREBY MAKES APPLICATION FOR A SALVAGE CERTIFICATE OF TITLE. ... THE OWNER WISHES TO RETAIN THE SALVAGE ON MENTIONED VEHICLE. ... DATE VEHICLE DECLARED A TOTAL LOSS: ... CITY/STATE WHERE TOTAL LOSS OCCURRED: ... DATE, INSURANCE COMPANY'S REPRESENTATIVE SIGNATURE

Submit \$15.00 Application Fee in certified funds (non-refundable) payable to the Alabama Department of Revenue.