

## **Georgia Department of Revenue - Motor Vehicle Division Certification of Inspection by a Duly Constituted Georgia Law Enforcement Officer**



This form must be completed by a Georgia law enforcement officer, then submitted to the county tag office by the vehicle owner. Please refer to https://dor.georgia.gov to locate the county tag office in your county of residence.

Purpose of this form: This form is to be used by a Georgia law enforcement officer to certify inspection of a motor vehicle, motorcycle or scooter.

Completing this form: This form must be completed in its entirety, legibly printed in blue or black ink. Any correction or alteration will void this form. **Section A:** Record the vehicle inspection information.

Section B: Record the full legal name, driver's license number, mailing address and telephone number of the vehicle owner.

·	Section C: Complete the law enforcement officer's certification with signature and date.  A VEHICLE INSPECTION																				
Year:	Make:										Model:										
Body Style:								Color:													
Public Vehicle Identification No. (PVIN):  Visible through windshield: [ ] Yes [ ] No																					
Federal Motor Vehicle Location:	cle Safety Labe																				
Public Vehicle Iden Check applicable box		Supporting Documentation Establishing Ownership of the Applicant: Check applicable box.																			
[ ] Rosette Rivets [ ] Adhesive								[ ] Certificate of Title													
[ ] Screws [ ] Missing / Not Visible									[ ] Vehicle Registration Card / Notice												
Describe condition	_	[ ] Manufacturer's Statement of Origin																			
									If no Certificate of Title or Vehicle Registration Card, describe documents presented:												
Has the manufacturer affixed a National Highway Transportation Safety Administration (NHTSA) label certifying the vehicle, motorcycle or scooter conforms to applicable U.S. Federal Motor Vehicle Safety Standards (FMVSS)? [ ] Yes [ ] No																					
B OWNER INFOR	RMATION																				
Vehicle Owner's Full Legal Name:	First, Middle Initial, Last, Suffix							Driver's License No.:													
Mailing Address:	Street No. Street Name Apt./Suite No.																				
City:			State:			ZIF	Code	e:			Tel	lephone	No.:								
C CERTIFICATION OF LAW ENFORCEMENT OFFICER																					
Law Enforcement Officer's Name:																					
Badge No.:		ficial 1	al Title / Rank:																		
Law Enforcement Agency's Name:								Telephone No.:													
Mailing Address:	Street No. Street Name Apt./Suite No.																				
City:			State: ZIP Co					de:			Co	ounty:									
GCIC/NCIC Response to Stolen Inquiry:											e:	1	/	Time:							
The signature of the duly constituted law enforcement officer examining this vehicle certifies that said officer completed this form and conducted an inquiry on the Georgia Crime Information Center's (GCIC) and/or National Crime Information Center's (NCIC) stolen vehicle files to establish the status of this vehicle under the penalty of false swearing (O.C.G.A. § 16-10-71).																					
Law Enforcement Officer's Signature:  Date:									/	,	/										