## STATEMENT OF NON-USE

## FOR THE PURPOSE OF CANCELING LIABILITY INSURANCE

This statement must be completed in its entirety and signed by the registered owner.

This is to declare that I.				
	(Registered Owner's Full Name)		(Driver's License Number)	
(Address)		(	(City, State, Zip Code)	
registered owner of a _				
	(Year)	(Make)	(VIN)	
will not operate or allow	w this vehicle t	to be operated on any i	roads or highways until	
I I I I I I I I I I I I I I I I I I I		I man j	8	
/	/	The *begi	nning date will be the date this	
(Ending Date – Mon	th, Day, Year)	-	-	
statement is submitted	to the Office of	f Motor Vahicles		
statement is submitted		i wiotor venicies.		
	1 1 41 4			
By my signature, I ackr	•			
1) The above statemen	t of non-use is	true and correct.		
2) It is my responsibili ending date will be a	•	nother statement to the	Office of Motor Vehicles if the	

- 3) It is my responsibility to obtain liability insurance on this vehicle prior to operating it on the roads or highways.
- 4) When this vehicle is once again operating on the roads or highways this statement will become void.

(Registered Owner's Signature)

(Date)

## NOTE TO VEHICLE OWNER:

The \* "beginning date" will be:

- the date received in office, if hand delivered;
- the postmark date on the envelope, if mailed.

For the purposes of canceling the liability insurance on this vehicle this statement must be submitted to the Office of Motor Vehicles <u>on or prior to the cancellation date</u> of the liability insurance policy. If not, this statement can not be used as compliance for purpose of canceling liability insurance.