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DORMANT VEHICLE AFFIDAVIT

Definitions:

Dormant Vehicle—means a motor vehicle for which a policy of liability insurance is required and will not be operated for an extended period of time because of mechanical or seasonal circumstances.

Seasonal Vehicle—means a motor vehicle that is not used during certain periods of the year because of weather or other factors that make operation of the vehicle during those periods undesirable, unnecessary or impractical. An extended period of time as it pertains to seasonal vehicles is a period of not less than three months.

Mechanical Circumstances—means that the components or systems of a motor vehicle have failed to such an extent that the vehicle cannot be operated. An extended period of time as it pertains to mechanical circumstances is a period of not less than thirty days or more than six months.

Components or systems of a motor vehicle—means the engine, brakes, transmission system, drive train, heating and air-conditioning, cooling, or muffler and exhaust systems.

Nevada Revised Statutes (NRS) 485.320.3 requires that a person who owns a dormant vehicle and who cancels the policy of liability insurance covering that vehicle or allows the policy to expire, cancel the vehicle registration on or before the date on which the policy is canceled or expires. The registered owner may keep the license plates after the license plates have been canceled by the DMV for 18 months and use them to re-register the vehicle in Nevada.

When a vehicle is going to be dormant for seasonal or mechanical reasons, the owner must cancel the vehicle registration through the Department before canceling the insurance policy. If the registration is not canceled, the vehicle registration will be suspended. The reinstatement fee for an insurance verification suspension is \$250.00.

At the time this affidavit is submitted, original supporting documents covering the time frame that the vehicle was not insured (such as receipts for storage and/or repairs) must be included. If the department finds that the documents do in fact cover the time frame in question, the registered owner is required to pay a 50.00 reinstatement fee.

Please complete the reverse side of this form to request Dormant Vehicle Status

INSTRUCTIONS FOR COMPLETING AFFIDAVIT

REQUIREMENTS: Documents must be presented to a full service DMV office or where applicable, County Assessor to reinstate vehicle privileges.

1. Present original receipts and/or documentation to verify circumstance and time frames.
2. Present evidence of current Nevada motor vehicle liability insurance.
3. Affidavit must be completed in full and notarized or witnessed by an authorized DMV Representative.
4. \$50.00 reinstatement fee.

TO BE COMPLETED BY THE REGISTERED OWNER

Please Print or Type

Full Legal Name of Registered Owners (as documented on the driver's license or identification card):

Registered Owner(s) _____
First Middle Last

Registered Owner(s) _____
First Middle Last

Registered Owner(s) _____
First Middle Last

Registered Owner(s) _____
First Middle Last

Address _____
Street City State Zip Code

Vehicle Identification Number

Year _____ Make _____ Nevada License Plate Number

The described vehicle was not operated from _____ to _____ due to:

- Seasonal Circumstances
 - Stored at a storage facility, presented storage agreement
 - Stored on private property, presented notarized affidavit from property owner
- Mechanical Circumstances
 - Work performed by a mechanic, presented work order
 - Work performed by an individual, presented receipts for parts

I understand in order to receive consideration for the reduction of the reinstatement fee; I am presenting documentation to cover the time frame that I/we did not have motor vehicle liability insurance. I declare under penalty of perjury that the foregoing is true and correct and the vehicle was not operated during this time frame. In the future, I agree to cancel my vehicle registration before I cancel my insurance to avoid a penalty.

Registered Owner Signature _____ Date _____

Subscribed and sworn to before me this _____ day of _____ 20_____

Notary Public or Authorized Nevada DMV Representative

For Departmental Use

Approved Denied Comments _____

Receipts verified, type _____
Supervisor _____ Date _____