



# Proof of Visual Inspection

Registry of Motor Vehicles • Title Division  
P.O. Box 55892 • Boston, MA • 02205-5892

**This vehicle must be submitted for a visual examination of its vehicle identification number (VIN) at any state police barracks, or local police station.**

Instructions to officer/inspector:

1. Make visual inspection of VIN.
2. Sign name and badge number.

## A. Owner Information

|                               |      |            |                |        |
|-------------------------------|------|------------|----------------|--------|
| Last Name                     |      | First Name | Middle Initial | Suffix |
| Business Name (if applicable) |      |            |                |        |
| Address                       |      |            |                |        |
| Street                        | City | State      | Zip Code       |        |
| Email Address                 |      |            | Phone #        |        |

## B. Vehicle Information

|              |      |            |      |
|--------------|------|------------|------|
| Model Year   | Make | Model Name | Type |
| Vehicle ID # |      | Color      |      |

Owner's Signature: \_\_\_\_\_

## C. Certification and Signature

I certify that I visually inspected the above described vehicle on this date \_\_\_\_\_ and found the vehicle identification number to be:

Insert Vehicle Identification Number (VIN)

Is VIN #:  Missing  Changed  Altered

Department/Office: \_\_\_\_\_

Officer's/Inspector's Signature: \_\_\_\_\_

Badge #: \_\_\_\_\_