



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