



MISSOURI DEPARTMENT OF REVENUE  
 MOTOR VEHICLE BUREAU  
**APPLICATION FOR REPLACEMENT OF VEHICLE  
 IDENTIFICATION NUMBER PLATE**

<b>SEE INSTRUCTIONS ON REVERSE</b>			
VALIDATION ONLY			
REGISTERED OWNER (LAST, FIRST, MIDDLE)			
STREET, R.R. OR P.O. BOX NUMBER			COUNTY
CITY, STATE, ZIP CODE			TELEPHONE NUMBER
YEAR	MAKE	BODY STYLE	VEHICLE IDENTIFICATION NUMBER
MISSOURI TITLE NUMBER	LICENSE NUMBER	LOSS OF VIN PLATE REPORT TO:	DATE
REASON REQUIRED			
<input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> MUTILATED <input type="checkbox"/> DESTROYED			
I certify that the statements above are true and that I am the registered owner of the above described vehicle.			
NOTARY SEAL		APPLICANT'S SIGNATURE	
		SWORN TO AND DESCRIBED BEFORE ME THIS	
		DAY OF _____, 19__	
		NOTARY PUBLIC	COMMISSION EXPIRATION
I certify that on _____ I physically inspected the above described vehicle after the applicant provided satisfactory proof of ownership and found the vehicle identification number to be:			
LAW ENFORCEMENT AGENCY			FILE NUMBER
INSPECTING OFFICER			BADGE NUMBER
I certify that on _____ I did affix the replacement vehicle identification plate number _____ issued by the Department of Revenue to the above vehicle.			
INSERT NUMBER			
LAW ENFORCEMENT AGENCY			
LAW ENFORCEMENT OFFICER			BADGE NUMBER

MO 860-0315 (9-86)      DISTRIBUTION: WHITE, YELLOW, PINK - DEPT. OF REVENUE      DOR-923 (9-86)  
 GOLDENROD - INSPECTING LAW ENFORCEMENT AGENCY