

APPLICATION FOR REBUILT SALVAGE VEHICLE DECAL



	APPLICANT AND VEHICLE INFORMATION								
Ī	Applicant(s) Name-(exact			Daytime Phone Number					
STEP #1				(-				
	Mailing Address			City		State	ZIP		
				City		State	20		
	Vehicle Make Ye		Year	ear VIN					
	Model	Body Style	Wyoming Tit	le #	E-mail Addres	SS			
		L							
	REPAIR INFORMATION								
	Name of Person or Business that Rebuilt/Repaired Vehicle Daytime Phone Number						hone Number		
						() -			
	Physical Address			City		State	ZIP		
	Identify vehicle's damage prior to repair-this MUST be completed in order to process. (Note: Vehicles that are								
	deemed salvage from Hail or Theft are NOT required to get a Rebuilt Salvage Decal per W.S.31-2-108(c))								
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STEP #2									
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S									
			<i></i>						
	Apply rebuilt salvage de		•			•			
	a manner that does not	t obscure th	ne vehicle identifica	tion number.		•			
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MV-600 (9/22)