DR 2087 (09/02)
COLORADO DEPARTMENT OF REVENUE
MOTOR VEHICLE BUSINESS GROUP
TITLE SECTION
www.mv.state.co.us

VERIFICATION OF VEHICLE IDENTIFICATION NUMBER

☐ New ☐ Used	Type of Vehicle ➧	☐ Passenger ☐ Truck ☐ Tractor ☐ Bus	☐ Trailer ☐ Motor Home ☐ Manufactured Home ☐ Special Mobile Machinery	☐ 2 Wheel Motorcycle ☐ 3 Wheel Motorcycle	Fuel Type ➧	☐ Gas ☐ Electric ☐ Diesel ☐ Other _____		

Vehicle Identification Number (VIN)	Year	Make	Body	Model	Color

Additional VIN	Odometer Reading
☐ Motor # ☐ Coach # ☐ Other # _____	

License Plate Number	State	Expiration Date

Reason For Inspection: ☐ Out of State Vehicle ☐ Title Correction ☐ Other _____

Verified By: ☐ Licensed Colo. Dealer No. _____ ☐ Licensed Colo. Emission Station No. _____
☐ County Clerk ☐ Colo. Law Enforcement

I certify under penalty of perjury in the second degree that I have completed a physical inspection of the vehicle described above and the information is true and correct to the best of my knowledge.

Name of business, county, or agency			
Address of business, county, or agency	City	State	ZIP
Print name of inspector	Title		
Signature of inspector		Date	