Georgia Department of Revenue - Motor Vehicle Division
Certification of Inspection by a Duly Constituted Georgia Law Enforcement Officer

This form must be completed by a Georgia law enforcement officer, then submitted to the county tag office by the vehicle owner. Please refer to https://dor.georgia.gov to locate the county tag office in your county of residence.

Purpose of this form: This form is to be used by a Georgia law enforcement officer to certify inspection of a motor vehicle, motorcycle or scooter.
Completing this form: This form must be completed in its entirety, legibly printed in blue or black ink. **Any correction or alteration will void this form.**
Section A: Record the vehicle inspection information.
Section B: Record the full legal name, driver's license number, mailing address and telephone number of the vehicle owner.
Section C: Complete the law enforcement officer's certification with signature and date.

A VEHICLE INSPECTION

Year: _____ **Make:** _____ **Model:** _____

Body Style: _____ **Color:** _____

Public Vehicle Identification No. (PVIN):
Visible through windshield: [ ] Yes [ ] No

Federal Motor Vehicle Safety Label:
Location: _____

Public Vehicle Identification No. (PVIN) Plate / Label Attachment:
Check applicable box.

[ ] **Rosette Rivets** [ ] **Adhesive**
[ ] **Screws** [ ] **Missing / Not Visible**

Describe condition: _____

Has the manufacturer affixed a National Highway Transportation Safety Administration (NHTSA) label certifying the vehicle, motorcycle or scooter conforms to applicable U.S. Federal Motor Vehicle Safety Standards (FMVSS)? [ ] Yes [ ] No

Supporting Documentation Establishing Ownership of the Applicant:
Check applicable box.

[ ] **Certificate of Title**
[ ] **Vehicle Registration Card / Notice**
[ ] **Manufacturer's Statement of Origin**

If no Certificate of Title or Vehicle Registration Card, describe documents presented:

_____

B OWNER INFORMATION

Vehicle Owner's Full Legal Name: First, Middle Initial, Last, Suffix _____ **Driver's License No.:** _____

Mailing Address: Street No. Street Name Apt./Suite No. _____

City: _____ **State:** _____ **ZIP Code:** _____ **Telephone No.:** _____

C CERTIFICATION OF LAW ENFORCEMENT OFFICER

Law Enforcement Officer's Name: _____

Badge No.: _____ **Official Title / Rank:** _____

Law Enforcement Agency's Name: _____ **Telephone No.:** _____

Mailing Address: Street No. Street Name Apt./Suite No. _____

City: _____ **State:** _____ **ZIP Code:** _____ **County:** _____

GCIC/NCIC Response to Stolen Inquiry: _____ **Date:** _____ **Time:** _____

The signature of the duly constituted law enforcement officer examining this vehicle certifies that said officer completed this form and conducted an inquiry on the Georgia Crime Information Center's (GCIC) and/or National Crime Information Center's (NCIC) stolen vehicle files to establish the status of this vehicle under the penalty of false swearing (O.C.G.A. § 16-10-71).

Law Enforcement Officer's Signature: _____ **Date:** / /

Have a question? Visit our website at https://dor.georgia.gov/motor-vehicles or scan the QR code above for more information.