



REQUEST FOR VEHICLE DISPOSAL

DATE (YYYY/MM/DD)

VI No. 2 2 -

I request the registration of the motor vehicle be transferred to me.

The impoundment period for the impounded motor vehicle expired on _____
DATE (YYYY/MM/DD)

I am surrendering licence plates numbered _____ to the Superintendent of Motor Vehicles

I am not submitting licence plates to the Superintendent of Motor Vehicles for the following reason(s):

***If no plates are surrendered and no reason is given, the request for disposal will not be considered.
Included with this request is a completed Statutory Declaration Vehicle Disposal Section 255(7) form
(MV2704 -27/05/2016)*

Legal Name Of Impound Lot

Date

Name of Lot Owner/Operator

Signature

Ministry of Public Safety and Solicitor General MV2709 (2017/01)	RoadSafetyBC	PO BOX 9254 STN PROV GOVT VICTORIA BC V8W 9J2 www.gov.bc.ca/roadsafetybc	Telephone: (250) 387-7747 Facsimile: (250) 356-6544
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