## STATEMENT OF NON-USE

## FOR THE PURPOSE OF CANCELING LIABILITY INSURANCE

This statement must be completed in its entirety and signed by the <u>registered owner</u>.

This is to declare that I,		,	
,	(Registered Owner's Fu	II Name)	
(Address)		(City, State, Zip Code)	
registered owner of a, _(Year)		(VIN)	
will not operate or allow this vehicle		roads or highways until	
	The *beg	ginning date will be the date this	
statement is submitted to the Office o	f Motor Vehicles.		
<ul> <li>By my signature, I acknowledge, that</li> <li>1) The above statement of non-use is</li> <li>2) It is my responsibility to submit arending date will be extended.</li> <li>3) It is my responsibility to obtain liaroads or highways.</li> <li>4) When this vehicle is once again of void.</li> </ul>	true and correct. nother statement to the		
(Registered Owner's Signatu	ire)	(Date)	

## NOTE TO VEHICLE OWNER:

The \* "beginning date" will be:

- the date received in office, if hand delivered;
- the postmark date on the envelope, if mailed.

For the purposes of canceling the liability insurance on this vehicle this statement must be submitted to the Office of Motor Vehicles <u>prior to or within 10 days following the termination date</u> of the liability insurance policy. If not, this statement can not be used as compliance for purpose of canceling liability insurance.