KANSAS DEPARTMENT OF REVENUE DIVISION OF VEHICLES TOPEKA, KANSAS 66626-0001 (913) 296-3621

VERIFICATION REQUEST

I.				
-,	Name (F	Please Print)		
Address	City	State	(ZIP) Telephone
REQUEST (CHECK ONE):		FEES (PER VEHICLE)		
Verification of Title &/or Registration		Owner* \$3	3.50; Not tl	he Owner** \$5.00
Copy of Title Applic	ation	\$10.00		
Copy of Vehicle His	tory	\$10.00		
For the Following Vehicles	:			
Tag Number	Make			Year
Identification Number				
(MUST Check One)	nformation for the or to any person ny person any list purpose of allowin	purpose of sellin who resides at of names or ad- g that person to resides at any a owner of the vel	ng or offering any address dresses cont o sell or offer address listee nicle.	g for sale any property or s listed; (B) sell, give or ained in or derived from r for sale any property or
SIGNATURE:				
DATE:				
Send request to the address at	the top of the form,	"Atten.: T&R	VERIFICATIO	N".
Make check payable to: K	ANSAS DEPARTMEN	T OF REVENUE.		
PLEASE DO NOT SE	ND CASH.			

NOTE: Registered owner is the person(s) or business that has made an application for title and registration in their name at the local County Treasurer's office in the State of Kansas.