

Georgia Department of Revenue - Motor Vehicle Division Request for an Inspection of a Rebuilt Motor Vehicle



Purpose of this Form: This form is to be used to request an Inspection of a Rebuilt Motor Vehicle.

How to submit this Form:

- If using a state inspector, include a check, money order, or certified funds made payable to the Department of Revenue in the amount of \$118. This amount covers the inspection and title fees. Submit to the address below.
- If using a private inspector, submit this completed form to the inspector at the time of inspection.

Please refer to https://dor.georgia.gov/titles-rebuilt-or-restored-vehicles for additional information on the Rebuilt Registration Process.

It is the applicant's responsibility to tow, not drive, the vehicle to the inspection location.

To request an	nspection of a Rebuilt Mo	otor Vehicle (choose one

Private Inspector

- Generally completed same day
- Take this form to the inspection appointment
- Be prepared to pay the inspector \$100 inspection fee
- If this vehicle currently has an out-of-state rebuilt title, the title may be applied for at your local county tag office instead of mailing the documents to the Motor Vehicle Division

State Inspector

- Takes 4-6 weeks to process
- Inspections are scheduled during the hours of 8:00 am to 4:30 pm Monday through Friday, excluding state holidays
- Upon receipt of your application, the Department's state inspector will contact you to schedule the inspection.

Fees due to the Department of Revenue: \$18 title fee if vehicle passed private inspection; \$118 if requesting state inspector (including title fee).

*Additional fee if applicable: \$50 for assembled vehicle - \$25 for motorcycle

Mail this completed form, payment, and all applicable documentation to:

DOR/Motor Vehicle Division Attn: Salvage Unit P. O. Box 740384 Atlanta, GA 30374-0384

If this vehicle is eligible for a Georgia title, passes inspection, and all applicable documents with fees have been submitted, please process the issuance of a certificate of title.

В	VEHICLE INFORMATION			
Year & Make of Vehicle:		Vehicle Identification Number (VIN):		
С	OWNER INFORMATION	D VEHICLE LOCATION		
Vehicle Owner's Name(s):		Vehicle Location (Residence or Business Name)		
Street Address:		Street Address		
City, State, Zip:		City, State, Zip:		
E	GEORGIA TAX NUMBERS	F CONTACT INFORMATION		
Sales Tax ID Number (if applicable)		Person to contact Regarding Inspection:		
Withholding Tax Number (if applicable)		Work Phone:	Cell Phone:	
G	AGREEMENT			

I understand that a \$100 inspection fee must be paid each time the vehicle is inspected or re-inspected. I also understand that there is an \$18 title fee for processing this application once the vehicle passes inspection (additional fee for assembled vehicle \$50 – motorcycle \$25).

H OWNERS SIGNATURE

Signature: Date: