

TITLING REBUILT VEHICLES

**Missouri Department of Revenue
Motor Vehicle Bureau
301 West High Street
P.O. Box 100
Jefferson City, MO 65105-0100
(573) 526-3669**

Form 4698 (08-2019)

TITLING A REBUILT MOTOR VEHICLE/OBTAINING A VEHICLE IDENTIFICATION NUMBER PLATE

When you purchase a motor vehicle and a Salvage Certificate of Title has been assigned to you, you must have the vehicle examined by authorized law enforcement after you have completed the rebuilding process (see item four below). In some cases, the examination may reveal that your vehicle needs a new or replacement identification number plate. The requirements are outlined in this brochure.

You must submit the requirements outlined below before you can title your rebuilt vehicle. The new certificate of title that issues in your name will be designated as "Prior Salvage" on the face of the title. If you have any questions regarding the information outlined in this brochure, please call (573) 526-3669.

TITLING REQUIREMENTS

1. A Salvage Certificate of Title assigned to you;
NOTE: If the title is not a "conforming" title that meets federal odometer disclosure requirements, you must attach an odometer disclosure statement to the salvage title for a vehicle less than 10 years old. You can obtain an Odometer Disclosure Statement form at the department's website at <http://dor.mo.gov/mvdl/motorv/forms/3019.pdf>.
2. A bill of sale indicating the purchase price of the vehicle;
3. An Application for Missouri Title and License (DOR-108) completed and signed;
4. A Vehicle Examination Certificate (DOR-551);
NOTE: The white copy must accompany your application. The applicant should complete the top half of the form and the Missouri State Highway Patrol Inspector or other authorized officer must complete the bottom portion.

You may purchase this form for \$25.00 with a \$6.00 processing fee applied from a license office, or from the Motor Vehicle Bureau, P.O. Box 2076, Jefferson City, MO 65105-2076. Upon receipt of the form, you must make an appointment with an authorized law enforcement agent to inspect the vehicle.

Form 551 Missouri Department of Revenue Vehicle Examination Certificate		All bills of sale for parts listed must be in applicant's name and must accompany this form when submitted to the Missouri Department of Revenue for title. This form must be submitted to the central office only.	
1. Applicant's Name (Vehicle Owner)		Validation Only	
2. Street Address			
3. City	4. State	5. Zip Code	6. Telephone Number
7. Salvage Business No. or Dealer No. (if Applicable)			
8. List any major component parts as defined in Section 301.010, RSMo, that were replaced in the boxes below. You must provide all of the information asked for in this section for each major component part. A major component part for a motor vehicle is a dash, rear end, frame, body, cab, front clip or front-end assembly. A major component part for a motorcycle is a frame. You must provide a notarized bill of sale and a copy of the front and back of the corresponding title for each part replaced. A copy of the title is not needed for a motor or transmission that is replaced on a motor vehicle. See reverse side for more information on parts.			
Major Component Part(s) Replaced	Year	Make	Serial Number
			Title Number
			State
9. List any other essential component parts which were replaced. Essential parts for a motor vehicle may include (but are not limited to) - bumper, doors, fender, grille, hood, trunk lid, motor or transmission. Essential component parts for motorcycles may include (but are not limited to) - driveline, handlebars, motor, transmission, gas tank, front fork assembly, or suspension parts. Attach corresponding descriptive bills of sale in the applicant's name. Taxes are due on parts unless paid at the time of purchase.			
10. If no parts used and no repairs completed, indicate reason: <input type="checkbox"/> Recovered Stolen <input type="checkbox"/> Flood or Half Damage Only <input type="checkbox"/> Out of State Verification <input type="checkbox"/> Abandoned Property <input type="checkbox"/> Other (Explain): _____ Department of Revenue Reject Letter # _____			
11. If no parts used, describe repairs: _____			
12. List the year and make of the vehicle being examined.		I do hereby certify that the above information is true and correct to the best of my knowledge.	
13. List the Vehicle Identification Number of the vehicle being examined.		14. Signature of Owner or Authorized Agent of Business	
		X	
Do Not Write Below This Line			
To be completed by authorized personnel of the Missouri Highway Patrol, or St. Louis City or County Auto Theft.			
15. Year	16. Color	17. Public VIN	Year
18. Make	19. Cyl.	20. Police VIN	Year
21. Model	22. HP	23. Engine VIN	Year
24. Body Style	25. GVWR	26. Transmission VIN	Year
27. Mileage	28. Federal Label	Year	
29. Select which of the following parts were changed: <input type="checkbox"/> Cab <input type="checkbox"/> Rear Clip <input type="checkbox"/> Frame <input type="checkbox"/> Body <input type="checkbox"/> Cab <input type="checkbox"/> Front Clip <input type="checkbox"/> This is a Non-USA Veh. Motor Vehicle <input type="checkbox"/> <input type="checkbox"/> Front-End Assembly <input type="checkbox"/> Motor or Engine <input type="checkbox"/> Transmission			
30. Condition of Abandoned Property: <input type="checkbox"/> No Apparent Damage <input type="checkbox"/> Damage Repaired (Explain in block 28.) <input type="checkbox"/> Damage Unrepaired (Explain in block 28.)			
31. Remarks or any discrepancies noted (use additional sheet of paper if necessary).			
<input type="checkbox"/> Verified Vehicle Being Examined (See #9C)		32. Recommended Department of Revenue Issue: <input type="checkbox"/> Replacement VIN <input type="checkbox"/> Complete and Attach Form 5062 <input type="checkbox"/> DR#	
33. I certify to the best of my knowledge that my physical inspection of this vehicle on _____, 20____, disclosed the information in items 11 thru 28 and that no pertinent serial numbered parts or vehicle identification numbers came from or belong to stolen vehicles.			
34. Law Enforcement Agency	35. Examining Officer's Signature	36. Examining Officer's Phone Number	37. Badge Number
Mail to: Motor Vehicle Bureau PO Box 2076 Jefferson City, MO 65105-2076		Phone: (573) 526-3669 E-mail: myemail@dor.mo.gov Visit: http://dor.mo.gov/forms/missouri_titling_manual.pdf for additional information.	
Form 551 (Revised 05-2014)			
Distribution: White - Applicant Submit to Revenue Canary - Examining Officer Pink - Customer Goldenrod - Office Audit Copy			

5. Notarized bills of sale in the applicant's name for all major component parts listed in item 8 on the Vehicle Examination Certificate (DOR-551);

NOTE: On the reverse side of the form are definitions of major component parts. Each descriptive bill of sale must also include the purchase price, year, make and vehicle identification number of the motor vehicle from which the parts were obtained.

- A copy of the front and back of the Certificate of Title for the vehicle(s) from which the MAJOR COMPONENT PARTS were obtained that are listed in item 8 on the Vehicle Examination Certificate (DOR-551);
- All invoices, receipts, and bills of sales for any parts listed in item 9 on the Vehicle Examination Certificate (DOR-551);
- A \$8.50 title fee and \$6.00 processing fee,
- All state and local taxes on the purchase price of the vehicle and any parts that do not indicate that sales taxes were previously paid.

IF THE DOR-551 INSPECTION FORM REVEALS THAT A REPLACEMENT VEHICLE IDENTIFICATION NUMBER PLATE IS REQUIRED, YOU MUST SUBMIT:

An Application for Replacement of Vehicle/Vessel/Trailer Identification Number Plate (DOR-5062) completed in full, a \$7.50 replacement plate fee, and a \$6.00 processing fee, in addition to items 1 through 9 as previously listed.



NOTE: The application must be certified by an authorized law enforcement officer as noted on the reverse side of the form.

IF THE DOR-551 INSPECTION REVEALS A STATE ASSIGNED VEHICLE IDENTIFICATION NUMBER IS REQUIRED, (DR NUMBER) YOU MUST SUBMIT:

A \$7.50 fee and \$6.00 processing fee for a state assigned vehicle identification number plate in addition to items 1 through 9 as previously outlined.

MAIL APPLICATION AND ALL REQUIREMENTS TO:

For a regular title: Motor Vehicle Bureau
Special Titling Unit
P.O. Box 2076
Jefferson City, MO 65105-2076

IF THE VIN PLATE OF A VEHICLE NEEDS TO BE REPLACED BECAUSE THE NUMBER IS ALTERED, DESTROYED OR MISSING, YOU MUST SUBMIT:

- An Application for Replacement of Vehicle/Vessel/Trailer Identification Number Plate (DOR-5062) completed, signed, notarized and certified by an authorized law enforcement officer as noted on the reverse of this form.
- A copy of the front and back of the Missouri Certificate of Title in the applicant's name.

NOTE: If the title is assigned to an applicant, he or she must also apply for an original title, and pay all sales taxes, a title fee and a title penalty, if applicable. A registered dealer is not required to apply for a title in the dealership's name, but must submit a copy for the title assigned to them, comply with inspection requirements and pay the appropriate fee.

- A \$7.50 replacement identification number plate fee and \$6.00 processing fee.

MAIL APPLICATION AND ALL REQUIREMENTS TO:

Motor Vehicle Bureau
P.O. Box 2076
Jefferson City, MO 65105-2076

The Missouri State Highway Patrol must affix the assigned or replacement vehicle identification number plate ("DR" Number) to the rebuilt vehicle. When application for title is made in conjunction with the identification number plate request, the title will not issue until the plate is affixed and the officer sends a signed verification of affixation to the Motor Vehicle Bureau.

MISSOURI DEPARTMENT OF REVENUE MOTOR VEHICLE BUREAU APPLICATION FOR VEHICLE/TRAILER IDENTIFICATION NUMBER PLATE OR VERIFICATION		Form 5062 (Revised 08-2019)	CONTROL NO.
SEE INSTRUCTIONS ON REVERSE			
INSTRUCTIONS: Step 1: Applicant must complete and sign Section A. Step 2: If a replacement vehicle identification number (VIN) is required, Section B must be notarized by a notary public. Step 3: Submit your motor vehicle/trailer and this form to authorized law enforcement as designated on the reverse side of this form. Step 4: Submit the completed form to the Department of Revenue as noted on the reverse side of this form.			VALIDATION ONLY Office Use Only — New ID:
SECTION A — APPLICANT			
PURPOSE OF INSPECTION (check one): <input type="checkbox"/> TITLE CORRECTION OR VEHICLE VIN VERIFICATION <input type="checkbox"/> NEW IDENTIFICATION NUMBER PLATE			
<input type="checkbox"/> REPLACEMENT IDENTIFICATION NUMBER PLATE <input type="checkbox"/> TRAILER WITH SALVAGE TITLE			
VIN? (check one): <input type="checkbox"/> MOTOR VEHICLE <input type="checkbox"/> MANUFACTURED TRAILER <input type="checkbox"/> HOME MADE TRAILER <input type="checkbox"/> MANUFACTURED HOME BUILT PRIOR TO 1996 (REQUIRES INSPECTION FROM PUBLIC SERVICE COMMISSION)			
REGISTERED OWNER (LAST, FIRST, MIDDLE)	DEALER NUMBER	COUNTY	DAYTIME TELEPHONE NUMBER
STREET, RR, OR P.O. BOX NUMBER		CITY	STATE MO ZIP CODE
MOTOR VEHICLE/TRAILER/MANUFACTURED HOME			
YEAR	MAKE	VEHICLE IDENTIFICATION NUMBER	MISSOURI TITLE NUMBER
BODY STYLE	MODEL	COLOR	CYLINDERS
COMPLETE THE INFORMATION BELOW IF APPLYING FOR A REPLACEMENT VIN — APPLICATION MUST ALSO BE NOTARIZED		REASON REQUIRED	
LOSS OF VIN PLATE REPORTED TO: <input type="checkbox"/> LOST <input type="checkbox"/> STOLEN <input type="checkbox"/> MUTILATED <input type="checkbox"/> DESTROYED		I certify that the statements above are true and that I am the registered owner of the above described units). SIGNATURE →	
SECTION B — NOTARY PUBLIC			
NOTARY PUBLIC EMBOSSED OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)	
SUBSCRIBED AND SWORN BEFORE ME, THIS _____ YEAR		USE RUBBER STAMP IN CLEAR AREA BELOW.	
NOTARY PUBLIC SIGNATURE	BY COMMISSION EXPIRES		
NOTARY PUBLIC NAME (TYPED OR PRINTED)			
SECTION C — FOR AUTHORIZED LAW ENFORCEMENT AGENCY USE ONLY — DO NOT WRITE BELOW THIS LINE			
I certify that on _____ I physically inspected the above described vehicle/trailer after the applicant provided satisfactory proof of ownership and found the identification number(s) as recorded below: <input type="checkbox"/> MOTOR CHANGE <input type="checkbox"/> OTHER			
MOTOR VEHICLES AND TRAILERS ONLY. NOT TO BE USED FOR MANUFACTURED HOMES.			
YEAR	MAKE	BODY STYLE	VEHICLE IDENTIFICATION NUMBER
PUBLIC VIN			
POLICE VIN			
VIN TO BE REPLACED: _____			
<input type="checkbox"/> REPLACEMENT VIN REQUIRED <input type="checkbox"/> NEW VIN REQUIRED — IF A TRAILER UNIT: <input type="checkbox"/> HOME MADE TRAILER <input type="checkbox"/> MANUFACTURED TRAILER			
<input type="checkbox"/> NO REPLACEMENT VIN REQUIRED TYPE OF TRAILER _____ LENGTH _____			
REMARKS AND DISCREPANCIES NOTED			
LAW ENFORCEMENT AGENCY	FILE NUMBER	EXAMINING OFFICER'S SIGNATURE	TELEPHONE NUMBER
TO BE COMPLETED BY AUTHORIZED LAW ENFORCEMENT WHEN A DR NUMBER OR REPLACEMENT VIN PLATE IS AFFIXED.			
I certify that on _____ I did affix the new/replacement VIN plate, control number _____ issued by the Department of Revenue to the above vehicle.			
<input type="checkbox"/> The outstanding VIN plate listed above has been surrendered and forwarded to the Missouri State Highway Patrol, Motor Vehicle Inspection Division.			
LAW ENFORCEMENT AGENCY		LAW ENFORCEMENT OFFICER'S SIGNATURE	BADGE NO.
DISTRIBUTION: WHITE — DEPARTMENT OF REVENUE. CANARY — INSPECTING LAW ENFORCEMENT AGENCY Form 5062 (Revised 08-2019)			