



**APPLICATION FOR SALVAGE  
CERTIFICATE WITHOUT TITLE**

(Print or Type Everything Except Signature)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_  
*Street City State Zip Code*

**DESCRIPTION OF VEHICLE**

Odometer Reading: \_\_\_\_\_ Odometer Brand: \_\_\_ C \_\_\_ D Title Brand: **S**  
(Brand Entered By DMV)

Odometer Reading Options

- 1) The odometer reading is not the actual mileage. -WARNING ODOMETER DISCREPANCY
- 2) Mileage not being disclosed: Vehicle must be over 10 years old, "0" must be entered as reading

Make: \_\_\_\_\_ Year: \_\_\_\_\_ Model: \_\_\_\_\_ Body Style: \_\_\_\_\_ No. of Axles: \_\_\_\_\_  
*Vehicle Identification No.*

MGVWR: \_\_\_\_\_ Color: \_\_\_\_\_

Lien: \_\_\_ None

Title Number: **U** \_\_\_\_\_

**I/We certify, under penalty of perjury, that all liens have been satisfied as required by law, accurately stated and that the statements made herein are true and correct to the best of my/our knowledge, information and belief.**

**X** \_\_\_\_\_  
*Signature of Applicant (Required)*

\_\_\_\_\_  
*Printed Name of Applicant (Required)*

\_\_\_\_\_  
*Official Title (Required)*

\_\_\_\_\_  
*Printed Name of Company (Required)*

**The following information must be received before the application can be processed:**

- Completed MV215 Application for Salvage Certificate without Title
- Completed Affidavit in Lieu of Certificate of Title for Salvage Vehicle
- Title Fee: \$35



**AFFIDAVIT IN LIEU OF CERTIFICATE OF TITLE FOR SALVAGE VEHICLE**

*(Do not use this form if you have the vehicle's Certificate of Title)*

Purpose: This form is only to be used by Insurers or Auctions applying for a Salvage Certificate to certify that a valid Certificate of Title for the vehicle acquired by the applicant is not available due to circumstances as detailed in 21 Del. C. § 2512 (g) and (h). The Division of Motor Vehicles may refuse to accept an incomplete filing.

**APPLICANT INFORMATION** (Please Print)

Applicant's Name: (name of insurance company or auction) _____		Applicant's Address (street and number, city, state, and zip) _____	
Applicant's Telephone # _____	Applicant's Email Address: _____	Applicant's Authorized Representative _____	
Is Applicant an insurance company? (check one) Yes ___ No ___	Is Applicant an auction? (check one) Yes ___ No ___		

**VEHICLE INFORMATION**

Year	Make	Model	Color	Vehicle Identification Number
Name and Registered Address of Former Owner of Vehicle: _____				
* Attach copies of two (2) written attempts sent by certified mail or courier to contact the vehicle's former owner and any known lienholder.				

**CERTIFICATION**

**1. Insurance Company Applicant Only:** I am authorized to sign this document on behalf of the applicant insurer identified above and I certify and affirm that all information presented in this form is true and correct and that any documents I/we have provided with this application are genuine and that the information contained therein is also true and accurate. I certify and affirm that: (i) I have provided documentary evidence indicating the company has paid a total-loss claim to the former owner of the vehicle; (ii) the company has satisfied any existing lienholder; (iii) the company has not been able to obtain the Certificate of Title from the former owner; and (iv) I have provided legible copies of two (2) written attempts, sent by certified mail or courier, the company has made to contact the vehicle's former owner at the owner's last known address, based on the company's records. **I understand that I am making this certification and affirmation under the penalty of perjury and that knowingly making a false representation on this form is punishable by law.**

Signature of Authorized Agent of the Applicant	Printed Name	Position	Date
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**2. Auction Only:** I am authorized to sign this document on behalf of the auction applicant identified above and I certify and affirm that all information presented in this form is true and correct and that any documents I/we have provided with this application are genuine and that the information contained therein is also true and accurate. I certify and affirm that: (i) the auto auction took possession of a motor vehicle at the request of an insurance company, (ii) the motor vehicle is the subject of an insurance claim, (iii) there is no total loss insurance settlement resulting in transfer of ownership of the motor vehicle to the insurance company, (iv) the motor vehicle has been abandoned at the facility of the auto auction for more than 30 days, and (v) I/we provided legible copies of two (2) written attempts, sent by certified mail or courier, to contact the last known owner of the vehicle at his/her last known address and any known lienholder, to have the vehicle removed from the facility; and (v) I/we do not have the former owner's Certificate of Title. **I understand that I am making this certification and affirmation under the penalty of perjury and that knowingly making a false representation on this form is punishable by law.**

Signature of Authorized Agent of the Applicant	Printed Name	Position	Date
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DMV Use Only: Approved by: _____	Date: _____
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21 *Del. C. § 2512* (g) and (h) Transfer for Salvage.

(g)(1) An insurance company that does not receive, within 30 days from the date of the total loss insurance settlement, the properly endorsed certificate of title for a motor vehicle acquired as salvage may apply to the Department for a salvage certificate in the name of the insurance company, without surrendering the certificate of title for the vehicle.

(2) Regardless of the existence of a lien against the vehicle, the Department shall issue a salvage certificate in the name of the insurance company, free and clear of all liens, if the application is accompanied by all of the following:

- a. Evidence of payment of the total loss claim.
- b. An affidavit from the insurance company or its authorized agent stating that it has made at least 2 written requests for the properly endorsed certificate of title that were addressed to the vehicle owner of record and any known lienholders and sent by certified mail or commercial courier whose regular business is delivery service and that provides proof of delivery.

(h)(1) A licensed auto auction may apply for a salvage certificate in the name of the auto auction without surrendering the certificate of title if all of the following exist:

- a. The auto auction took possession of a motor vehicle at the request of an insurance company.
- b. The motor vehicle is the subject of an insurance claim.
- c. There is no total loss insurance settlement resulting in transfer of ownership of the motor vehicle to the insurance company.
- d. The motor vehicle has been abandoned at the facility of the auto auction for more than 30 days.

(2) Regardless of the existence of a lien against the vehicle, the Department shall issue a salvage certificate in the name of the auto auction, free and clear of all liens, if the application is accompanied by evidence that the auto auction made at least 2 written attempts to have the vehicle removed from the facility that were addressed to the vehicle owner of record and any known lienholders and sent by certified mail or commercial courier whose regular business is delivery service and that provides proof of delivery.

59 *Del. Laws, c. 541, § 1*; 63 *Del. Laws, c. 53, § 2*; 71 *Del. Laws, c. 57, §§ 1, 2*; 80 *Del. Laws, c. 328, § 1*; 81 *Del. Laws, c. 319, § 1*;