



Submission Checklist: Request for Salvage Title

THIS CHECKLIST IS INTENDED TO SERVE AS A STEP BY STEP GUIDE FOR INSURANCE COMPANIES AND AUCTIONS WHEN SUBMITTING A REQUEST FOR SALVAGE TITLE:

I. OTHER NJMVC FORMS REQUIRED:

NJMVC SS-61 (IF AN "OUT OF STATE" TITLE IS SUBMITTED)

II. CHECKLIST:

A. IS THE PACKAGE COMPLETE AS SUBMITTED?

1. Does each request include?

- Certificate of Title
- Power(s) of Attorney (if applicable)
- Insurance Listing Sheet
- Check
- A NJMVC Form SS-61 (if an "Out of State Title" is submitted)

For bulk packages:

2. Is the number of requests consistent with cover sheet?

- Yes
- No

3. Are the VINs on the Titles consistent with the cover sheet?

- Yes
- No

B. IS EACH TITLE COMPLETED CORRECTLY?

1. Is there both an Out of State Insurance Company and an Out of State Title? If yes, this request cannot be processed in accordance with NJSA....

2. If applicable, is the Lien Holder Identified?

- Yes
- No

If Yes, is the Lien Released by...

- A signature on the Title? or,
- An attached Letter?

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Is all Seller Information complete and accurate?

3. Has the Seller both Signed and Printed their name on the reverse side of Title?

- Yes
 No

4. If applicable, is there a Power of Attorney attached?

- Yes
 No

If Yes, has the Power of Attorney both Signed and Printed their Name on the Reverse Side of Title?

- Yes
 No

Is all Buyer Information complete and accurate?

5. Are the Buyer's Name, Address and Corpcode Identified on the Reverse Side of Title?

- Yes
 No

Is the Buyer's Name In Agreement with the Insurance Listing Sheet?

- Insurance Company
 Auction

6. Is the Buyer's Name both Signed and Printed on Reverse Side of Title?

- Yes
 No...or,

7. If applicable, is there a Power of Attorney attached?

- Yes
 No

If Yes, has the Power of Attorney both Signed and Printed their Name on Reverse Side of Title?

- Yes
 No

C. PAYMENT

8. Is the Date of Sale identified?

- Yes
 No

9. Is the Correct Fee Attached consistent with the Date of Sale?

- \$20 (Ten (10) or Less Days from Date of Sale and Receipt at MVC)
 \$45 (More than Ten (10) Days from Date of Sale and Receipt at MVC)

10. Is the Check Signed?

- Yes
 No

11. Is the "NJ Sales Tax Satisfied" Stamped Affixed?

- Yes
 No

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12. Is the "NJ Sales Tax Satisfied" Stamped Completed Correctly?

- Yes
 No

D. IS THE INSURANCE LISTING SHEET COMPLETED CORRECTLY?

13. Is the Type of Title Requested Identified?

- Salvage
 Standard

14. Is the Listing Sheet on Company Letterhead?

- Yes
 No

15. Is the Corp Code Correct for the Corporation Identified?

Type of Corporation:

- Insurance Company
 Auction

Correct Corp Code:

- Yes
 No

16. Is all the required Vehicle Information Provided and Accurate?

- Make
 VIN
 Year
 <8 years old
 >8 years old
 No

17. Is the ACV Provided?

- Yes
 No

18. Is the Damage Estimate Provided?

- Yes
 No

19. Is the Type of Loss Provided?

- Yes
 No

E. IF AN "OUT OF STATE TITLE" IS INCLUDED IN THE REQUEST, IS THE "APPLICATION FOR SALVAGE CERTIFICATE OF TITLE (NJMVC FORM ISM/SS-61)" INCLUDED AND COMPLETED CORRECTLY?

20. Is the SS-61 provided?

- Yes
 No

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21. Is All Vehicle Information Provided and Accurate?

- Make
- Year
- Body Type
- VIN
- Mileage
- No

22. Is a Statement of "How the Title was Acquired" Provided?

- Yes
- No

23. If applicable, is the Lien Holder Identified?

- Yes
- No

If Yes, is the Lien Holder Information Complete and Accurate?

- Name,
- Corpcode
- Address
- No

24. Is all Applicant Information Provided and Accurate?

- Signature
- Address
- Corp Code
- No

III. INSTRUCTIONS:

A. Forms are available On-Line at www.njmvc.gov or by phone at 888-486-3339.

(PLEASE NOTE: REQUESTS FOR SALVAGE TITLE CANNOT BE PROCESSED AT A NJMVC AGENCY OR REGIONAL SERVICE CENTER AND MUST BE MAILED OR DELIVERED IN ACCORDANCE WITH SECTION B. BELOW).

B. Requests for Salvage Title requests must be processed at the MVC Division of Special Services. Requests may be hand delivered to the Customer Service Counter located on the Second Floor at the NJMVC Offices located at 225 East State Street, Trenton NJ (directions available at www.njmvc.com) or mailed to the following address:

**New Jersey Motor Vehicle Commission
Division of Special Services
ATTN: Special Title Unit
PO Box 017
Trenton, New Jersey 08666-0017**

C. Any questions regarding the above? Need forms or assistance?

Please call us at 888-486-3339 or 609-292-6500