



INSTRUCTIONS

- 1) Complete this form.
- 2) Separate the VEHICLE PORTION of your ownership from the plate portion at the centre perforation. Please keep the plate portion for your own records and remit only the vehicle portion.
- 3) Complete application for transfer on the back of the vehicle portion. The registered owner (s) must sign the vehicle portion where it says, "Signature of Seller".
- 4) Write in the odometer reading to the left of your signature.
- 5) Drop off the vehicle anytime at or contact us to discuss towing.
- 6) Remove license plates from the vehicle for your future use.

CONTACT INFORMATION		VEHICLE INFORMATION	
Name(s): _____ Address: _____ Telephone: (HOME) _____ (ALTERNATE) _____ Email: _____ Please check <input checked="" type="checkbox"/> all that apply: <input type="checkbox"/> I will drop off the vehicle. <input type="checkbox"/> Please contact me regarding vehicle transportation. <input type="checkbox"/> Please send more information about the charity I am assisting through my car donation. <input type="checkbox"/> I would like to be on the Abuse Hurts email list to receive updates on events, programs and special opportunities (I understand that I can unsubscribe at any time). <input type="checkbox"/> Apart from communicating regarding this donation, I do not wish to receive any further communications from Abuse Hurts or its car donation program affiliates. <input type="checkbox"/> I don't need a tax receipt, thanks.		Make: _____ Model: _____ Year: _____ Colour: _____ V.I.N. <div style="border: 1px solid black; width: 100%; height: 1.2em; display: flex;"> </div> Odometer Reading <div style="border: 1px solid black; width: 100%; height: 1.2em; display: flex;"> </div> <input type="checkbox"/> Kilometers <input type="checkbox"/> Miles <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: 20px;"> <input type="checkbox"/> Check here if the odometer does not show actual distance travelled. </div> Engine <input type="checkbox"/> Good <input type="checkbox"/> Ok <input type="checkbox"/> Poor <input type="checkbox"/> not running Transmission <input type="checkbox"/> Good <input type="checkbox"/> Ok <input type="checkbox"/> Poor <input type="checkbox"/> not working Trans. Type <input type="checkbox"/> Standard <input type="checkbox"/> Automatic Tires <input type="checkbox"/> Good <input type="checkbox"/> Ok <input type="checkbox"/> Poor Comments: _____ Is there a lien against this vehicle? <input type="checkbox"/> Yes <input type="checkbox"/> No Has this vehicle sustained accident damage during the time you owned it, or was this information disclosed to you when you bought it? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide details: _____ _____ I hereby donate this vehicle in its current condition to Abuse Hurts X _____ Date _____ Signature of registered owner(s)	
OFFICE USE ONLY			
Name of Official:		Official's Signature:	
Inventory database entry:	Location:	Customer database entry:	Location:
MTO entry:	Location:	Communication:	Location:
Receipt verified:	Date:	Value:	Closed: