



DORMANT VEHICLE AFFIDAVIT

NRS 485.317 NAC 485.028

Definitions:

Dormant Vehicle – means a motor vehicle for which a policy of liability insurance is required and will not be operated for an extended period-of-time because of mechanical or seasonal circumstances.

Seasonal Vehicle – means a motor vehicle that is not used during certain periods of the year because of seasonal residency, weather or other factors that make operation of the vehicle during those periods' undesirable, unnecessary, or impractical. An extended period-of-time, as it pertains to seasonal vehicles, is a period of not less than three months.

Mechanical Circumstances – means that the components or systems of a motor vehicle have failed to such an extent that the vehicle cannot be operated. An extended period-of-time as it pertains to mechanical circumstances is a period of not less than thirty days and not more than six months.

Nevada Revised Statutes (NRS) 485.320.3 requires that a person who owns a dormant vehicle and who cancels the policy of liability insurance covering that vehicle or allows the policy to expire, surrender the vehicle registration on or before the date on which the policy is canceled or expires. The registered owner may keep the license plates after the registration has been surrendered by the DMV to use the license plates to re-register the vehicle in Nevada.

When a vehicle is going to be dormant for seasonal or mechanical reasons, the owner must cancel the vehicle registration through the Department before canceling the insurance policy. If the registration is not canceled, the vehicle registration will be suspended. The reinstatement fee for an insurance verification suspension uses a tiered system.

At the time this affidavit is submitted, original supporting documents covering the time frame that the vehicle was not insured (such as receipts for storage and/or repairs) must be included. If the department finds that the documents do in fact cover the time frame in question, and there is sufficient evidence that the vehicle had not been driven, the registered owner may qualify to pay a reduced reinstatement fee. However, if there are fines due associated with the tiered insurance sanction, only the fines associated with the dormancy will be waived, other fines may apply. This is counted as an offense.

INSTRUCTIONS FOR COMPLETING AFFIDAVIT

Requirements: Documents must be presented to a full-service DMV office or County Assessor (where applicable) to reinstate vehicle registration privileges.

1. Present original receipts and/or documentation to verify circumstance and time frames.
2. Present evidence of current **Nevada** motor vehicle liability insurance.
3. Affidavit must be completed in full and notarized or witnessed by an authorized DMV Representative.
4. Pay a reinstatement fee of \$50.00 and any applicable fines.
5. Complete the Declaration of Responsibility, NVL019.

TO BE COMPLETED BY THE REGISTERED OWNER

Please Print or Type

Full Legal Name of Registered Owners (as documented on the Nevada driver's license or identification card):

Registered Owner _____

First Middle Last DL#

Physical Address _____

Street City State Zip

Mailing Address _____

Street City State Zip

Vehicle Identification Number

Year _____ Make _____ Nevada License Plate Number

The described vehicle was not operated from ____ / ____ / ____ to ____ / ____ / ____
Month/Day/Year Month/Day/Year

Check appropriate circumstance below and provide required supporting documentation.

Seasonal Circumstances:

- Stored at a storage facility, presented storage agreement
- Stored on private property, presented notarized affidavit from property owner

Mechanical Circumstances:

- Work performed by a mechanic, presented work order
- Work performed by an individual, presented receipts for major component parts

I understand in order to receive consideration for the reduction of the reinstatement fee; I am presenting documentation to cover the time frame that I/we did not have Nevada motor vehicle liability insurance. I declare under penalty of perjury that the foregoing is true and correct and the vehicle was not operated during this time frame. In the future, I agree to cancel my vehicle registration before I cancel my insurance to avoid a penalty.

Registered Owner Signature _____ Date _____

State of _____ County of _____

Signed and sworn to (or affirmed) before me on _____ by _____
Date Name of person making statement

Notary Stamp

Notary Public or Authorized DMV Representative

For Departmental Use

Approved Denied Comments _____

Receipts verified, type _____

Supervisor _____ Date _____