

rxPrivate - Valid 60 Days □Dealer – Valid 1 Year

CERTIFICATE OF VEHICLE INSPECTION

| VEHICLE TYPE | | | | | LE INFOR | MATION | | | | | |
|---------------------------------------|----------------------------|--------------------------------|--|-------------------|-------------------------------------|----------------|---|-----------|---|----------------------------|----------|
| VEHICLE MAKE | SS 🗆 | M/H | M/C TF | | TRACTOR | X TRL | Го | THER | | | |
| OTHER | MODEL OTHER | | | BODY TYPE | | | YEAR 2006 | 10 | | | |
| TRAILER SCALE V | | | | | | COLOR White | | ۲. | | | |
| LICENSE NUMBER | | STATE | MILEAGE | FUEL TYPE | | | 100000000000000000000000000000000000000 | | rince | OTHER VEHICLE MAKE | \dashv |
| Vant | FDM | 1150 | 100000 | ☐ GAS | ☐ DIESE | L LPG | ☐ EL | ECTRIC | OTHER | WESTERN TRAILER COMPANY | 1 |
| VIN: | 5DN1153466B000896 | | | | | | | | | | |
| ENGINE/ COACH NO.: | | | | | | | | - | | | - |
| I/WE HEREBY | AFFIRM T | HE ABOVE | -DESCRIBED VE | EHICLE WA | S PRESEN | TED TO THE | FOLLOW | ING WE | OFFICE AS | ANI | 4 |
| OUT OF STATE | □ SALV REBU | AGE/ [| PARTS ONLY VEHICLE | TX VIN | IFICATION | | MEMADE | | | AN. | |
| | | | | D | OCUMEN | TATION | | | | | |
| VIN AGREES | | / F0 | | | | | - mil openie e | | | | |
| WITH DOCUMENTS | 5: Г \ | ES | NO IXI | | | | | VIN O | K: NO DOCL | JMENTS | |
| DOCUMENT(S) PRI TO SUPPORT OWN | ESENTED FIERSHIP: | T BILL O | | DOL LET REQUES | | MCP REC | CEIPTS | | OMETER SCLOSURE | TITLE/ SALVAGE TI | TLI |
| | | | | | COMME | NTC | | | | | and the |
| ERROR ON WA | A TITLE #1 | 713923725 | 5TH DIGIT SH | OULD BE A | "1" (ONF) | NOT "5" (FIV | (E) | | | | |
| | | | | ADDI I | CANT INC | OBLIANIO | | 40.00 | | | |
| APPLICANT | ALCOHOL: NO. | | 经收益的 | AFFEN | APPLICANT INFORMATION PRIMARY PHONE | | | | | | |
| ORGANIZATION APP | PRIMARY ORGANIZATION PHONE | | | | | | | | | | |
| WASHINGTON COM ADDRESS | POSTLLC | | | | | | | , THORE | Total Control of | | |
| | | | | | | | | | | | |
| ORGANIZATION ADD PO BOX 3279, ARLI | ORESS STON WA 982 | 23 | | | | | | | | | |
| OPERATOR LICENS | DEALER NUMBER/UBI | | | | | | | | | | |
| PURCHASED FROM | ASE | ASE WRECKING YARD/STOCK NUMBER | | | | | | | | | |
| | | | | | | WRECKING | TARDISTOC | K NUMBER | | | |
| ADDRESS | | | | | | | | | | | |
| | | | ACCOUNT TO A STATE OF THE STATE | | | | | | | | |
| | | | | | | INFORMA | | | | | |
| HIS INSPECTI | ON IS CON | CERNED | WITH IDENTITY | ON NI CIMA | WAY GUAR | RANTEES TH | IE VEHICL | E TO BE | FREE FROM | DEFECTS | |
| NSPECTING OF | FICER J | .LUPPINO | AL | PERS# | | | | | Washington State Patrol X648 (04) DISTRICT 10(6) | | |
| VSP OFFICE: \ | /ANICOL II II | ·D | | | | | | | DEC | 0 5 2025 | _ |
| OFFICE. V | ANCOUVE | ir. | | | DAT | E OF INSPE | CTION: 12 | 2/05/2025 | | | |
| | | | | | | | | | inspected b | y X648 Luppino | |