

REQUEST FOR VEHICLE DISPOSAL

Instructions:

Subrecipients requesting to dispose of a vehicle which has reached the end of its useful life must complete this form and submit it via email to incog. Upon incog approval, the subrecipient and/or organization will then receive a lien release from incog along with instructions on the disposal process.

Contact Information:				
Organization Name:				
Address:				
Phone:				
Email Address:				
Vehicle Information				
Vehicle Make/Model/Year				
Vehicle Identification Numbe	r (VIN)			
Current Odometer Reading				
Reason for Disposal Request				
Relevant information concern	ning the vehicle			
(damage,incidents, etc.)				
Please note: If the disposed asset has a fair market value of \$5,000 or more, the Federal share of the proceeds must be returned to FTA via INCOG. This will be 80% of the total proceeds from the sale of each vehicle; the payment will be made through a reduction in your next reimbursement request for your next new vehicle.				
I certify the vehicle informatio	n is accurate and comple	ete:		
Signa	ture		 Date	
_				
Printed	Name			
State Agency Authorization (C	Office Use Only)			
INCOG Approval of Disposal F	Request		Transfer	:
Name of INCOG Office	cial Ap	proval Date	Date Lien Release Reco to Subrecipient/Orga	