



ALABAMA DEPARTMENT OF REVENUE  
 MOTOR VEHICLE DIVISION – TITLE SECTION  
 P.O. Box 327640, Montgomery, AL 36132-7640

**Application For Stolen-Unrecovered Vehicles**

APPLICATION  
 MVT 40-1e  
 R 12/11

THIS FORM MAY BE DUPLICATED OR ADDITIONAL COPIES MAY BE OBTAINED FROM  
 THE DEPARTMENT WEB SITE AT [www.revenue.alabama.gov/motorvehicle/mvforms/mvt40-1e.pdf](http://www.revenue.alabama.gov/motorvehicle/mvforms/mvt40-1e.pdf)

TITLE NUMBER

VEHICLE INFORMATION	VEHICLE IDENTIFICATION NUMBER										TRANS. CODE	YEAR MODEL	MAKE	MODEL	BODY TYPE
	CYLS	NEW	USED	DATE OF PURCHASE			COLOR	ODOMETER READING *			CURRENT ALABAMA TITLE NO.				

OWNER INFORMATION	NAME OF INSURANCE COMPANY				FELONY OFFENSE FOR FALSE ADDRESS				APPLICANT SHALL DISCLOSE ODOMETER READING (check one) *			
	MAILING ADDRESS								<input type="checkbox"/> ACTUAL MILEAGE <input type="checkbox"/> EXCEEDS MECHANICAL LIMITS <input type="checkbox"/> NOT ACTUAL MILEAGE — WARNING, ODOMETER DISCREPANCY			
	CITY				STATE		ZIP					

**DEPARTMENT USE ONLY**

LOCATOR NO.

REJECT TO:	REASONS:
EXAMINER NO.	ENCL:

**A**

NAME AND ADDRESS OF INSURANCE CO. AND ADJUSTING CO. (IF ANY)

NAME OF INSURANCE COMPANY	NAME OF ADJUSTING COMPANY
PHYSICAL ADDRESS	PHYSICAL ADDRESS
CITY STATE ZIP	CITY STATE ZIP
ADJUSTER'S NAME (TYPE OR PRINT)	ADJUSTER'S NAME (TYPE OR PRINT)
TELEPHONE NUMBER	TELEPHONE NUMBER

INSURANCE COMPANY CLAIM OR POLICY NUMBER: \_\_\_\_\_

DATE VEHICLE DECLARED A STOLEN: \_\_\_\_\_

CITY/STATE WHERE THEFT OCCURRED: \_\_\_\_\_

I, THE UNDERSIGNED, CERTIFY THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND THAT THE INSURANCE COMPANY LISTED ABOVE IS NOW THE OWNER OF THE VEHICLE DUE TO A STOLEN VEHICLE SETTLEMENT BETWEEN THE INSURED AND THE INSURANCE COMPANY.

DATE \_\_\_\_\_ INSURANCE COMPANY'S REPRESENTATIVE SIGNATURE \_\_\_\_\_ (PERSONALLY SIGNED (IN INK) BY AUTHORIZED REPRESENTATIVE OF FIRM)

**SEE INSTRUCTIONS ON REVERSE SIDE  
 FEE \$15.00**

**Submit \$15.00 Application Fee in certified funds (non-refundable)  
 payable to the Alabama Department of Revenue.**

## Instructions for Form MVT 40-1e

1. Effective January 1, 2012, when a settlement has occurred between an insurance company and the insured for a vehicle that has been reported as stolen in this state, the insurance company may make application for certificate of title in their name by completing form MVT 40-1e and submitting the following documents:

(a) Outstanding properly assigned certificate of title. Note: Documents evidencing an involuntary transfer of the vehicle by operation of law may be used in lieu of the outstanding certificate of title.

(b) Any other documents used to support the application or transfer of title.

(c) Fee as required in Section 32-8-6 (a) (1), *Code of Alabama 1975*.

2. The individual completing MVT 40-1e must verify Vehicle Identification Number (VIN) and other vehicle information using information obtained from the outstanding certificate of title and the vehicle being reported as stolen. If a discrepancy in the VIN is found, the owner, in whose name the title is currently issued, must obtain a corrected certificate of title prior to the submission of the MVT 40-1e.

3. The owner information area must be completed using the name of the insurance company that paid compensation for the stolen vehicle settlement.

4. When an insurance company has declared the vehicle to be a total loss, and paid compensation to the owner, an authorized representative of the insurance company must complete the owner information section and Section A of the MVT 40-1e. The authorized representative must also disclose where the theft occurred.

5. Upon receipt of a properly completed MVT 40-1e and the supporting documents as specified in paragraph 1, the Department will issue an electronic certificate of title in the name of the insurance company indicating that the vehicle is reported as stolen and unrecovered.

6. Upon recovery of the vehicle, the insurance company shall electronically update the title record utilizing MVTRIP (<http://etaps.mvtrip.alabama.gov/StatusInquiry/TitleStatus.aspx>). The insurance company shall include, in the disclosure, whether the recovered vehicle was a total loss requiring that a salvage certificate of title be issued in the name of the insurance company. In addition, the insurance company shall provide, if applicable, an updated mailing address where the certificate of title shall be mailed.

7. Upon receipt of the disclosure from the insurance company, the Department shall issue a certificate of title in paper form in the name of the insurance company.