KANSAS DEPARTMENT OF REVENUE INSURANCE SETTLEMENT AFFIDAVIT

(Application for Salvage Title Not Surrendered by Claimant)

VEHICLE DESCRIPTION: Make ______ Year ____ VIN# _____ Fuel Type _____ Weight ____ Color **INSURANCE COMPANY:** Name of Insurance Company _____ Location Address City State Zip Printed Name of Individual or Business Receiving Settlement Acceptance Date of Settlement **EVIDENCE TO OBTAIN CERTIFICATION OF TITLE:** Evidence of two (2) written attempts to obtain the certificate of title were made without success is required and must accompany this document and be submitted with the application for salvage title. The written requests were sent to: Owner's Printed Name State Owner's Street Address Citv Zip Date of first attempt. (May be included as a condition of a settlement document): ___ Date of second attempt. (Must be at least 15 days after the first written attempt to obtain title): MM/DD/YYYY **CERTIFICATION:** I, the undersigned, authorized agent of the insurance company hereby certify the vehicle referenced in this affidavit has been wrecked and/or damaged to the extent which requires the vehicle to be designated as a salvage vehicle. A damage settlement has been accepted by the owner and the company has taken physical possession of the vehicle. The company attests the vehicle owner has failed to deliver an assigned title to the company, therefore the company has delivered by mail, in person or by electronic means, 30 days prior to filing this affidavit, two written demands to the owner for the surrender of an assigned title notifying the owner that failure to comply will result in the company claiming the title to the vehicle. The company will hold harmless and indemnify the Kansas Division of Vehicles, all officials and employees of the division for any loss suffered or claims counter to this affidavit resulting from the issuance of the salvage title. I declare, verify, certify or state under penalty of perjury that, I am an authorized agent of the insurance company listed herein that is authorized to do business in the State of Kansas. The insurance company accepts and takes all responsibility for compliance with KSA 58-813 and statutes listed therein as well as requirements listed in the affidavit and will be liable for any harm resulting from this action. Authorized Agent's Signature: Hand Printed Name: This affidavit was executed on: _____

MM/DD/YYYY

INSTRUCTIONS

- 1. At least one of the following conditions must be met:
 - The vehicle owner must be a Kansas resident and have a Kansas title in his or her name:
 - The vehicle was not titled in Kansas, however the insurance policy was written by an agent located and licensed in Kansas. A law enforcement accident report or an MVE-1 must accompany the insurance settlement affidavit for salvage title form.
 - The vehicle owner is from out-of-state, vehicle is titled out-of-state and the insurance policy was written out-of-state but the vehicle was wrecked in Kansas and is still located in Kansas. A Kansas law enforcement accident report must accompany this form. The accident report will be used as proof the accident occurred in Kansas.
- 2. If another agency or entity acts as Power of Attorney for an insurance company, the address of the insurance agency, and not the person acting as Power of Attorney, will be required under the Insurance Company section of this form.
- 3. KSA 21-3711 provides that falsifying information on any required document is a severity level 8, non-person felony. KSA 21-3710 deals with forgery; forgery is knowingly and with intent to defraud and is a severity 8 non-person felony. KSA 21-3805 addresses perjury, which is severity level 9 non-person felony.