

ABANDONED VEHICLE REPORT

INSTRUCTIONS

DISPOSAL BY A POLICE AUTHORITY

Complete Parts A, B and C.

- 1. Forward originals to the department within 90 days of the date of sale of the vehicle(s).
- 2. Forward a copy to the department within 10 days of the expiration of the 90 day claiming period, if there is a profit on the sale of any vehicle.
- 3. Retain one copy for your record.

When submitting the report the following must be included:

- 1. Impound report (must include the date each vehicle was taken into custody, where it was abandoned and a complete description of the vehicle)
- 2. Copy of dated notification to the owner and lienholder

Web Page: http://www.dot.state.ia.us/mvd/index.htm

3. Paid receipts for costs (these costs are outlined below)

All abandoned vehicles must be listed on the report, whether or not they were abandoned on public highways. Reimbursement will be made for vehicles abandoned on public highways only. Any unclaimed profit received from the sale of vehicles abandoned must be surrendered to the department. If you are not claiming reimbursement or reporting profit, you do not need to file a report.

REIMBURSEMENT WHEN EMPLOYING A PRIVATE ENTITY

Complete Parts A, B and C.

- 1. Forward originals to the department within 90 days of the date of disposal of the vehicle(s) by a private entity.
- 2. Retain one copy for your records.

When submitting the report the following must be included:

- 1. A copy of the Certificate of Disposal of an Abandoned Vehicle by a Private Entity (Form 411163).
- 2. Impound report (must include the date each vehicle was taken into custody, where it was abandoned, and a complete description of the vehicle.
- 3. Copy of dated notification to the owner and lienholder.
- 4. Paid receipts for costs (these costs are outlined below).

REIMBURSEMENT SCHEDULE PER VEHICLE

Auction cost - may not exceed 10% of sale price or \$10.00, whichever is less

Towing cost - may not exceed \$50.00

Storage cost - may not exceed \$5.00 per day and limited to 45 days unless the vehicle(s) are held for longer than 45 days for an evidentiary hearing. If the department provides storage no charge may be made. The number

of days in storage must appear on the bill.

Publication - may not exceed actual cost

Certified Mail - White receipt (copy) for certified mail-should have date stamped to

reflect 20 days process

TIME FRAMES

Reimbursement will not be made unless publication or notification to the owner was made within twenty (20) days.

Report must be submitted within ninety (90) days from the sale date.

Unclaimed profits must be reported to the department within ten (10) days from the expiration of the claiming period of ninety (90) days.

Name of Police Authority or Private Entity Sale Date										
PART A										
VEHICLE INFORMATION										
Item No.	Name of Purchaser/ Private Entity	Address of Purchaser/ Private Entity	OWI Impound	Sold To Demolish.	Date Vehicle Abandoned	Vehicle Abandoned on Public Highway or Highway Right of Way		Make	Yr.	
						Yes	No			
						+				
						+				
-						+				

Total

Name of Police Authority or Private Entity	Sale Date	
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PART B

COSTS INCURRED							PROFIT OR LOSS STATEMENT				
Item No.	VIN Number	Auction	Towing	Storage	Notice or Publication	Certified Mail	Total Cost	Sale Price	Loss	Profit	Profit Claimed by Owner/ lien holder
Total											

TO BE COMPLETED WHEN INITIAL REPORT IS MADE

I hereby certify that the cost incurred, sale price, profit or loss statement and other information listed on this report are true and correct to the best of my knowledge and belief. And that reimbursement is claimed only on those vehicles abandoned on public highways or highway right-of-ways.

This report consists of _	page(s). Total number of
vehicles listed	Amount of reimbursement claimed
\$	<u>.</u>
Sale Date	
Date	Name of Police Authority
Ву	Signature of officer and title
Date	Name of Private Entity
Ву	
•	Signature of Private Entity
TO BE COMPLETED	WHEN PROFIT REPORT SUBMITTED
Total of unclaimed profit	t remitted to the department
\$	
Date	Name of Police Authority
Ву	
	Signature of officer and title

TO BE COMPLETED BY AUDIT SECTION

Date Reimbursement Claim Received					
Reimbursement Claimed					
Less Profit					
Pay					
Profit Due DOT					
Remarks					
Need any supplies:					
☐ Form 411090 pads					
☐ Form 411104 pads					
☐ Form 411163 pads					
Copies of new rules					