



Three Affiliated Tribes DOT  
 Licensing Administration  
 PO Box 609  
 335 Main Street  
 New Town, ND 58763  
 (701) 627-4513  
 Website: www.mhadot.com

### STATEMENT OF DAMAGE OR THEFT

Has the vehicle been damaged by collision or another occurrence?  YES  NO

Has the vehicle been recovered from a theft?  YES  NO

Has the cost of repairing the vehicle to roadworthy condition amounted to 50% of it's fair market value at the time of the loss?  YES  NO

*The owner or legal agent of the owner of the vehicle described on this application shall answer the following questions and proceed accordingly. If you answer "Yes" to either of the questions, the owner or legal agent declares to the best of their knowledge.*

Applicants Signature	Date
Co-Applicants Signature	Date

### VEHICLE INSPECTION

Vehicle Identification Number	Odometer Reading (no tenths)
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*I, the undersigned, under the penalties of perjury do solemnly swear or affirm that I have physically inspected the above described vehicle and that the statements contained herein are true.*

*Also, I, the undersigned do hereby submit to the jurisdiction of the Mandan, Hidatsa, & Arikara Nation and its courts for purposes of enforcement, including without limitations the assessment and collection of any penalties, fines, and interests provided by the "Mandan, Hidatsa & Arikara Nation Vehicle and Licensing Code".*

Inspectors Signature	Date
Title or Position (if applicable)	

State of North Dakota or Mandan, Hidatsa & Arikara nation, County of \_\_\_\_\_ subscribed

and sworn before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Notary Stamp:

\_\_\_\_\_  
 My Commission Expires

\_\_\_\_\_  
 Notary Public

**OFFICE USE ONLY:**

*I have verified the VIN on the documents presented and matched it to the insurance verification form.*

Registrar's Signature	Date
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