

Vehicle Total Loss Claim Settlement Report

Insurance companies use this form to notify us within 15 days of settling a total loss claim on a vehicle. Submit this completed form to:

**Insurance Destroyed Desk
 Department of Licensing
 PO Box 9038
 Olympia, WA 98507-9038**

This form is not valid unless fully completed.

Vehicle information

Plate number	State	Vehicle identification number (VIN)	Model year	Make	Model
Registered owner name					
Address					
City				State	ZIP code
Legal owner name <i>(Enter "SAME" unless different from registered owner)</i>					
Address					
City				State	ZIP code
Status <input type="checkbox"/> Retained by owner <input type="checkbox"/> Retained by insurance company <input type="checkbox"/> Sold					

Insurance information

Name of insurance company					
Name of insurance company representative				(Area code) telephone number	
Address					
City				State	ZIP code
File or claim number	Date of loss	Settlement date	Today's date		

Market value threshold

Insurance companies are required to state whether a vehicle meets the current market value threshold, when reporting vehicles that are wrecked, destroyed or damaged.

<p>Answer the following</p> <p>Does this vehicle meet all the "salvage vehicle" criteria:</p> <ul style="list-style-type: none"> • Passenger car, light-duty truck with a gross weight of 12,000 pounds or less, or a sport utility vehicle • Is 6–20 years old • Meets the current market value threshold <p>..... <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If you do not mark the Yes or No box, the vehicle record may result in a WA REBUILT brand.</p>

Visit dol.wa.gov for the current market value threshold.