

Jackson County Sheriff's Office

Sheriff Tedd E. Frazier

350 Portsmouth St., Jackson, Ohio 45640
 Tel: 740-286-6464 Fax: 740-286-5635
 Web: www.jacksonso.org

Wrecker Service Salvage Vehicle Title Request

The State of Ohio requires certain information be collected and maintained for Salvage Vehicle titles, this information must be marked, or the request cannot be processed. This request must be completed before the vehicle can be searched. "N/A" cannot be a valid answer for boxes marked with (*). A fee of \$20 per vehicle will be charged. An additional \$10 fee will be charged when more than 2 certified letters are sent for title surrendering purposes.

Name of Wrecker Service making request for title *		Contact and Phone *		Submission Date
		Name: Phone: (____) ____ - _____		
Date Vehicle was towed *	What Police Agency, if towed by Law Enforcement	Location towed from *		Condition of Vehicle
Make of Vehicle *		Model of Vehicle *		Year of Vehicle *
Type of Vehicle *		Color of Vehicle *	License Plate information and State of Issue	
Vin# (Please verify this number on the vehicle, before submitting request) *				
Driver of the Vehicle			Owner	
Address given to Tow Company for vehicle			Phone number for Driver or Owner	

Any Insurance information (If so, What company, policy and phone number)	Last Date of Contact with owner and/or driver *	Fees owed for towing and storage (Fees must be paid, before vehicle can be released) *
		\$ _____
Wrecker Service Address (Street, City, State, Zip Code) *		

Signature of Wrecker Service Representative submitting request	JCSO Representative
X _____	X _____ Unit# _____

JCSO Notes:

Letter Mailed on: ____/____/____

Response Received on: ____/____/____

Ready for Pick Up: ____/____/____