

New Mexico Taxation & Revenue Department, Motor Vehicle Division

AFFIDAVIT OF NON-USE OF VEHICLE





AFFIDAVIT OF OUT-OF-STATE VEHICLE INSURANCE

Owner Information				
Name (last, first, middle initial)		Date of Birth		
Address		Phone Number		
City, State, ZIP Code		Driver's License Number and State		
Vehicle Information				
Make	Model Model	Year		
Plate Number	Vehicle Identification Number (VIN)			
	Non-Use Informat	ion		
** The NON-USE portion of this affidavit is only valid for a maximum of ONE YEAR. ** A new Affidavit of Non-Use of Vehicle MUST be completed each year that the vehicle will not be driven. Out-of-State Information MINIMUM MANDATORY LIABILITY LIMITS § 66-5-208: \$25,000 Bodily injury or death of one person in any one accident \$50,000 Bodily injury or death of two or more persons in one accident				
\$10,000 Destruction of property of others in any one accident Please initial box I currently have insurance coverage in compliance with the New Mexico Mandatory Financial Responsibility Act, §§ 66-5-201 through 66-5-239 NMSA 1978.				
Insurance Company		Policy Number		
Phone Number	Effect	tive Dates to		
Note: You MUST attach a copy of a current insurance card and declaration page containing liability limits. ** The OUT-OF-STATE portion of this affidavit is only valid during the effective dates of your insurance policy. ** A new Affidavit of Out-of-State Vehicle Insurance MUST be completed each time the policy renews.				
Affirmation				
I swear or affirm under penalty of perjury that the above statements are true and correct.				
Printed Name				
Signature		Date		
A new affidavit must be completed every time a vehicle status changes or, at a minimum, annually. • Vehicles registered and operated in New Mexico MUST have insurance coverage that meets the minimum liability requirements of the New Mexico Mandatory Financial Responsibility Act, §§ 66-5-201 through 66-5-239 NMSA 1978. • Bona fide New Mexico residency is required for vehicle registration (§ 66-3-4 NMSA 1978).				
Please return COMPLETED affidavit and ALL required documentation to the New Mexico Insurance Identification Database (IIDB). Mail to: P.O. Box 30147, Albuquerque, NM 87190-0147 OR FAX to: 505-243-6605				

For more information, please call the IIDB toll-free at 866-891-0665.



New Mexico Taxation & Revenue Department, Motor Vehicle Division

AFFIDAVIT OF NON-USE OF VEHICLE (or)



AFFIDAVIT OF OUT-OF-STATE VEHICLE INSURANCE

Owner Information				
Name (last, first, middle initial)		Date of Birth		
Address		Phone Number		
City, State, ZIP Code		Driver's License Number and State		
Vehicle Information				
Make	Model	Year		
Plate Number	Vehicle Identification Number (VIN)			
	Non-Use Information			
The vehicle identified above is not being operated for reasons that may include but are not limited to military deployment, mechanical issues, and storage or seasonal usage. Please enter anticipated non-use dates below. From: To: ** The NON-USE portion of this affidavit is only valid for a maximum of ONE YEAR.				
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