

GOVERNMENT OF THE VIRGIN ISLANDS OF THE UNITED STATES BUREAU OF MOTOR VEHICLES



DOCUMENT TRANSMITTAL MEMO

BUSINESS NAME:				
BUSINESS PHONE #:				
PLATE #	VIN	CUSTO	OMER NAME	TRANSACTION
Submitted By		Received By		
Name:			Name:	
Signature:			Signature:	
Date:				

Plate #: plate number of the vehicle to be processed VIN: vehicle identification number of the vehicle to be processed Customer Name: name of the customer whose vehicle is to be processed Transaction: renewal, duplicate, information update, transfer (provide the name of the customer the vehicle is to be transferred to), etc.