



**STATE OF MAINE**  
**BUREAU OF MOTOR VEHICLES**  
**Division of Enforcement, Anti-Theft and Regulations**

To: Complainant

From: Division of Enforcement, Anti-Theft and Regulations

Our office is dedicated to assisting each of our customers in a professional manner.

Attached is a complaint petition that we ask you to fill out in its entirety. The information that you provide is the foundation of our investigation. Please include all the details relative to your complaint, statements made and witnesses to those statements, any correspondence or certified return receipts you have, etc. You cannot put “too much” information onto this complaint document.

You must provide the following materials prior to the investigation of your complaint:

- Prior title (if available);
- Copy of the bill of sale;
- Completed title application (MVT-2);
- \$33 title fee;
- Completed affidavit of ownership (MVT-55);
- Vehicle Identification Number Inspection Form (MVT-10); and
- Proof of contact attempts with the prior owner.

The detective assigned to your case may request additional documentation.

Documents should be submitted to the Bureau of Motor Vehicle Division of Enforcement, Anti-theft and Regulations located at **101 Hospital Street, #29 State House Station, Augusta, ME 04333-0029.**

Your complaint is very important to us and will be acted upon as soon as possible. The detective assigned to your complaint will contact you at the appropriate time to discuss your complaint.

Should you have any questions, please do not hesitate to contact us.



**STATE OF MAINE**  
**BUREAU OF MOTOR VEHICLES**  
*Division of Enforcement, Anti-Theft and Regulations*

**PRIVATE SALE COMPLAINT PETITION**

**THE PERSON COMPLAINING IS:**

Your Name \_\_\_\_\_ Date of Birth \_\_\_\_\_  
 Street Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Ext. \_\_\_\_\_ Cell Phone \_\_\_\_\_  
 Email Address \_\_\_\_\_ Today's Date \_\_\_\_\_

**THE COMPLAINT IS AGAINST:**

Company / Person \_\_\_\_\_  
 Street Address \_\_\_\_\_ Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
 Business Phone \_\_\_\_\_ Person(s) Dealt With \_\_\_\_\_

**VEHICLE INFORMATION:**

Year \_\_\_\_\_ Make \_\_\_\_\_ Model \_\_\_\_\_ Color \_\_\_\_\_ Title Application CTA# \_\_\_\_\_  
 Identification # \_\_\_\_\_ Current Mileage \_\_\_\_\_  
 Date of Purchase \_\_\_\_\_ Mileage at Time of Purchase \_\_\_\_\_ Cost \_\_\_\_\_  
 Paid by: Cash  Check  Loan  Other \_\_\_\_\_  
 Where did you first view the vehicle? \_\_\_\_\_

Have you complained to the individual you purchased the vehicle from? Yes  No

How did you contact them? In person  by mail  by phone  by email

**\*Proof of contact attempts must be provided (e.g. copies of letters, emails, or screen shots).**

Have you hired a lawyer? Yes  No  Have you brought suit? Yes  No

**The Following Items Must Be Attached To Process Your Complaint**

Prior Title (If available)  Copy of Bill of Sale  Title Application (MVT-2)  Title Fee (\$33)   
 Notarized Affidavit of Ownership (MVT-55)  Vehicle Identification Number Inspection Form (MVT-10)   
 Proof of Contact Attempts with Prior Owner of The Vehicle

*101 Hospital Street, #29 State House Station, Augusta, Me 04333-0029 Tel. (207) 624-9000 Ext. 52144 Fax: (207) 624-9258 TTY Users call Maine relay 711*

Please provide a detailed description of your complaint. To the best of your ability include names, dates, addresses, and any other information that will assist with the investigation of your complaint. Once the required documentation is received, you will be contacted by a detective from this agency to discuss your complaint.

**YOUR COMPLAINT IS:**

*Please use additional paper if more space is needed.*

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I make this complaint in all honesty and agree to cooperate with all phases of this investigation, including court testimony, if requested.

Signature \_\_\_\_\_ Date \_\_\_\_\_

***Make sure copies of all support documents are enclosed***

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SECRETARY OF STATE  
BUREAU OF MOTOR VEHICLES



**INSPECTION OF (VIN) VEHICLE IDENTIFICATION NUMBER  
BY AUTHORIZED PERSON**

An inspection of a Vehicle Identification Number (VIN) is required by the Maine Motor Vehicle Certificate of Title and Antitheft Act (29A MRSA Chapter 7) for all vehicles that are 1995 model year and newer which were previously registered/titled in another country. An inspection of a VIN is also required whenever the Vehicle Identification Number of a vehicle is questionable.

- This form is NOT to be used to correct the VIN on a registration.
- Arrangements for inspection of a VIN must be made by the owner of a vehicle at no cost to the State of Maine.

**ONLY THE FOLLOWING ARE AUTHORIZED BY THE SECRETARY OF STATE TO INSPECT VINS:**

- Selected employees and agents of the Bureau of Motor Vehicles
- Law enforcement officers employed full-time
- Maine and New Hampshire licensed dealers (only if seller of vehicle)
- Maine official inspection stations (station number must be given)
- Military provost officers
- **For abandoned vehicle applications**, only law enforcement officers employed full-time are authorized to inspect the VIN.

Under penalties of false statement, the undersigned authorized person certifies to the following facts:

I certify that on \_\_\_\_\_ I personally viewed the vehicle described below at \_\_\_\_\_.

Year	Make	Model	Style	State & Plate # Where Last Registered	Location
<b>VIN must be copied from 2 places on the vehicle; if motorcycle, need frame VIN.</b>					
Public Vehicle Identification Number				Vehicle Identification Number on the Federal Sticker	
Owner's Name				Address	

Odometer Reading (no tenths)

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Actual   
  In Excess   
  Not Actual   
  miles   
  kilometers   
  hours

I further certify that:

**Check One:**     To the best of my knowledge, information and belief, the Vehicle Identification Number shows no sign of alteration or having been tampered with.

**OR**

The Vehicle Identification Number appears altered or tampered with.

Signature of Authorized Person	Date	Signature of Current Owner	Date
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Please clearly print name of person signing above	Please clearly print name of person signing above
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Name of Law Enforcement Agency or Inspection Station

Law Enforcement Officer Badge # or Inspection Station #	Law Enforcement Agency or Inspection Station Work phone #
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