



DAVID YATES
JEFFERSON COUNTY CLERK

REQUEST FOR MOTOR VEHICLE INSURANCE RECORD:

Date: _____

I request that the Jefferson County Clerk's Office provide me with insurance information for the following vehicle:

Plate, Title or VIN Number: _____

Vehicle Description (year, make & model): _____

Date of incident: _____

Requestor's Contact Information:

Name: _____

Address: _____

Phone: _____

Fax: _____

Requestor's Signature: _____

Processed Date: _____ Branch: _____

Clerk: _____ Phone Ext: _____