



VTR 68-A INSPECTION REQUEST FORM

Name: _____

Address: _____

Telephone number: _____

Date of Birth: _____ Driver's License #: _____ State: _____

Description of Vehicle (includes trailers) to be inspected: _____

VIN: _____

Who was the vehicle/trailer purchased from?: _____

What was the price?: _____

Is the vehicle/trailer homemade? : Yes No

Did you build it? : Yes No

How long have you had the vehicle (trailer)? : _____

County you will be registering vehicle (trailer) in?: _____

Signature: _____

Date: _____

You must email Sheriff's Combined Auto Theft Task Force Investigator at vtr68a@bellcounty.texas.gov to have the inspection performed. Email this form, along with any and all paperwork you have, on the vehicle/trailer.

Phone Number: (254) 933-5441 Fax Number: (254)933-5123