



State of Alabama  
 Department of Revenue  
 Motor Vehicle Division

No. \_\_\_\_\_

INV 31-1  
 2/17

P.O. Box 327641 • Montgomery, Alabama 36132-7641 • (334) 242-9000

# Inspection Application Remittance Advice

OFFICE USE ONLY	
Inspection	_____
Title	_____

Please submit a separate cashier's check for each application to avoid delays in processing when more than one application is submitted. Please note that the \$75.00 application fee and the \$15.00 title fee is *non-refundable*. Use of this form will expedite the processing of the application for inspection and issuance of title.

**All fees must be in certified funds.**

**Doc. Type MM**

DEPT. USE ONLY	OWNER'S NAME	CHECK NO.	VEHICLE IDENTIFICATION NO.	AMT. OF FEES
<b>TOTAL AMOUNT</b>				

Remitted By: \_\_\_\_\_

\_\_\_\_\_ LICENSE NUMBER

Date: \_\_\_\_\_

Agent: Motor Vehicle Division

Agent No.: 3-7

**ORIGINAL AND YELLOW COPY TO BE FILED WITH THE ALABAMA DEPARTMENT OF REVENUE  
 PINK COPY TO BE RETAINED BY THE APPLICANT**