MV-27B (8-12)

pennsylvania
DEPARTMENT OF TRANSPORTATION

Weekly Notification of Dealer Acquisition Covering Vehicles Acquired For Resale From An Individual (Non-Dealer)

NAME OF ACQUIRING DEALER

STREET ADDRESS

CITY | STATE | ZIP

DIN OF ACQUIRING DEALER — | DATE OF THIS REPORT Month Day Year

INSTRUCTIONS - COMPLETE THIS FORM IN DUPLICATE

1. Type or print all information as requested. Please do not skip item lines.
2. This report should contain a record of all vehicles acquired from individuals (non-dealers) during the past seven (7) calendar days.
3. A duplicate copy of this form must be retained by the acquiring dealer for a period of at least one year.
4. Mail original form weekly to: PA DEPARTMENT OF TRANSPORTATION
   BUREAU OF MOTOR VEHICLES
   PO BOX 68288
   HARRISBURG, PA 17106-8288

LINE ITEM NO.	VEHICLE TITLE NUMBER DO NOT ENTER ALPHA PREFIX	ENTER FIRST SEVEN LETTERS OF LAST NAME (OR BUSINESS NAME) OF ORIGINALTITLE HOLDER	DATE OF ACQUISITION (ENTER NUMERIC) Mo. DAY Yr.	ODOMETER READING
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CERTIFICATION: I, a registered Pennsylvania dealer, hereby certify that during the past seven (7) days, I have acquired and held/hold for resale the vehicles described on this report.

Signature of Acquiring Dealer/Authorized Representative

TOTAL NUMBER OF VEHICLES ACQUIRED AND LISTED ON THIS FORM

NO FEE REQUIRED