



Bureau of Motor Vehicles
Harrisburg, PA 17104

Risk Management Office Review Form

(Form required
with all applications)

For Department Use Only

A REQUESTOR INFORMATION

DATE	OPERATOR ID	UNIT	PHONE NUMBER	MESSENGER #	DIN #
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B ITEMS REQUESTED TO BE REVIEWED

(Please select the reason(s) why this work is being forwarded to RMO)

- | | | |
|--|---|---|
| <input type="checkbox"/> Address Fraud | <input type="checkbox"/> Insurance Card | <input type="checkbox"/> VIN Stop |
| <input type="checkbox"/> Proof of Identification | <input type="checkbox"/> Title | <input type="checkbox"/> W Stop |
| <input type="checkbox"/> • PA ID/DL | <input type="checkbox"/> MCO/MSO | <input type="checkbox"/> S Stop |
| <input type="checkbox"/> • Birth Certificate | <input type="checkbox"/> Odometer | <input type="checkbox"/> Other (Explanation Required) |
| <input type="checkbox"/> • Passport | | |

C EXPLANATION Detailed explanation required.

D RMO Recommendations: RMO OFFICE USE ONLY

- PA ID or PA Driver's License required in order to process.
- Attached documents are authentic, OK TO PROCESS.
- Attached documents are NOT authentic, DO NOT PROCESS.
- W Stop has been deleted, OK TO PROCESS.
- W Stop was NOT deleted; applicant must provide proof of residency with a state issued PA ID or PA Driver's License.
- DO NOT PROCESS, Title DEFACED, reject for a valid title.
- Other:

RMO Analyst:	Date:
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