



**NON-GOVERNMENT
EMERGENCY SERVICE VEHICLE**

I certify that the vehicle described below is used only for ambulance (as defined in ARS Title 36, Chapter 21.1), fire fighting or rescue services.

Vehicle Identification Number	Year	Make	License Plate
-------------------------------	------	------	---------------

Owner Name (first, middle, last, suffix)	Owner Signature
--	-----------------

Acknowledged before me this date.	Notary or MVD Agent Signature		
Date	County	State	Commission Expires