



MARYLAND "WATCH YOUR CAR" PROGRAM WITHDRAWAL FORM



Mail this form to the Maryland Vehicle Theft Prevention Council
1201 Reisterstown Rd., Pikesville, MD 21208
1-800-96-THEFT

Registered Owner's Last Name			First Name			Middle Name			
Street Address									
City & County			State		Zip Code		1. Area Code &Tele. #	2. Area Code & Tele. #	
Vehicle Tag Number		Tag Year	Make		Year	Model		Style	Color
Vehicle Identification Number (17 Digits)									

I/we are the owner(s) of the above-described vehicle and are requesting that the vehicle be withdrawn from the Maryland Watch Your Car Program.

I/we understand that the vehicle's identifying information will be removed from the statewide Watch Your Car computer database.

I/we hereby certify that both Maryland Watch Your Car decals have been fully removed from the above-described vehicle.

Printed Name Owner #1			Signature Owner #1			Date		
Printed Name Owner #2			Signature Owner #2			Date		
All Above Information Required to be Printed Except Signatures (Kindly Use Ink)								

Please check only one box:

I/we elect to have my/our vehicle removed from the "Watch Your Car" Program. I/we still own the vehicle and have removed both decals.

I/we have sold or transferred the vehicle and have removed both decals.

The registered vehicle is no longer operable or in my/our possession and I/we have removed both decals.

Please remove my/our vehicle from the Watch Your Car program because:

(Please explain) _____
