

Georgia Department of Revenue - Motor Vehicle Division Request for an inspection of a Rebuilt Motor Vehicle



T-22R (Revised 09/2023) Web and MV Manual

Purpose of this form: This form is to be used to request an inspection of a rebuilt motor vehicle.

How to submit this form:

- If using a state inspector, include a check, money order, or certified funds made payable to the Department of Revenue in the amount of \$118. This amount covers the inspection and title fees. Submit to the address below.
- If using a private inspector, submit this completed form to the inspector at the time of inspection.

Please refer to https://dor.georgia.gov/titles-rebuilt-or-restored-vehicles for additional information on the rebuilt registration process.

It is the applicant's responsibility to tow, not drive, the vehicle to the inspection location.

Α	To request an inspection of a rebuilt Motor Vehicle (choose one):			
	 Private Inspector Generally completed same day Take this form to the inspection appointment Be prepared to pay the inspector \$100 inspection fee If this vehicle currently has an out-of-state rebuilt title, the title may be applied for at your local county tag office instead of mailing the documents to the Motor Vehicle Division 	pm Monday through Frida	during the hours of 8:00 am to 4:30 y, excluding state holidays cation, the Department's state	
Fees due to the Department of Revenue: \$18 title fee if vehicle passed private inspection; \$118 if requesting state inspector (including title fee).				
*Additional fee if applicable: \$50 for assembled vehicle - \$25 for motorcycle				
 If th	Mail this completed form, payment, and all applicable documentation to: DOR/Motor Vehicle Division Attn: Salvage Unit P. O. Box 740384 Atlanta, GA 30374-0384 If this vehicle is eligible for a Georgia title, passes inspection, and all applicable documents with fees have been submitted, please process the			
issuance of a certificate of title.				
B VEHICLE INFORMATION				
Ye	ar & Make of Vehicle:	Vehicle Identification Number (VIN):		
С	OWNER INFORMATION	D VEHICLE LOCATION		
Vehicle Owner's Name(s):		Vehicle Location (Residence or Business Name)		
Street Address:		Street Address		
City, State, ZIP:		City, State, ZIP:		
Е	GEORGIA TAX NUMBERS	F CONTACT INFORMATION		
Sales Tax ID Number (if applicable)		Person to contact regarding inspection:		
With	holding Tax Number (if applicable)	Work Phone:	Cell Phone:	
G AGREEMENT				
I understand that a \$100 inspection fee must be paid each time the vehicle is inspected or re-inspected. I also understand that there is an \$18 title fee for processing this application once the vehicle passes inspection (additional fee for assembled vehicle \$50 – motorcycle \$25).				
Signature:		Date:		