

ONE YEAR DEFAULT AFFIDAVIT

(NRS 485.230)

Driver's License Number: _____

Date of Crash: _____

Case #: _____

Date of last payment: _____

I, hereby request the termination of the suspension of my driving privilege and/or vehicle registration in the State of Nevada, as provided for in the Motor Vehicle Insurance and Financial Responsibility Act, and in support of said request. I submit the following affidavit:

I, the undersigned, being first duly sworn, depose and state:

That my driving privilege and/or motor vehicle registration was/were suspended on _____ in connection with the crash described above; and

That one year has elapsed following the date of the last payment on the promissory note signed by myself in regards to this case; and

That during this period no legal action has been instituted and/or is pending against me involving any claim for damages or injuries arising out of this crash and/or case.

Signature: _____

Mailing address: _____

Signed and sworn to before me this

_____ day of _____ 20____
day month year

By _____

Notary Public or Authorized Nevada DMV Representative