NON-USE AFFIDAVIT

THIS IS TO CERTIFY THAT I,Name		
	Addres	SS .
OWNER OF A		
Year	Make	Vin Number
BEARING LOUISIANA LI	CENSE PLATE NU	MBER
		Plate Number
WILL NOT BE USING TH	IS VEHICLE ON A	NY HIGHWAYS OR BYWAYS
BEGINNING		то
Beginning D	ate MM/DD/YY	Ending Date MM/DD/YY
Motor Vehicles. If the affidavit. If the vehicle	ending date is goi is going to be dri e Office of Motor	responsibility to inform the Office of ng to be extended, I will submit another ven before the ending date, I will submit Vehicles prior to driving the vehicle,
Owner's Signature		Date
Notary Public Signature	······································	Date
This affidavit will be <u>"t</u> to submitting affidavit		nsurance is canceled on this vehicle prior otor Vehicles.