Title Recertification Verification

I, _____, certify that I have thoroughly read and completed the Driver and
Full name (please print)

Vehicle Services (DVS)/MADA title recertification review.

I am aware that the recertification is required every 3 years.

_____

User Name (DVS Logon) Dealership Dealer #

_____

Signature E-Mail address

_____

Office Manager Signature Date

Recertification fee of $50 will be billed directly to your MADA Services account.

Please send completed form to Ruth Goolsby, MADA, 200 Lothenbach Avenue, West St. Paul, MN 55118
OR
E-Mail – ruth@mada.org (Fax) 651-291-2894.