

County

Judicial District:
Court File Number:
Case Type: Civil

Demand for Judicial Determination of Forfeiture of Motor Vehicle
(Minn. Stat. §169A.63, subd. 8)

(Name)
(Address)
(City/State) (Zip Code)
(Telephone) Plaintiff/Claimant

vs.

(Vehicle Seized-Year, Make, Model)
(VIN #)
(Plate # ) Defendant

To:
(list both law enforcement agency that initiated the forfeiture and the prosecuting authority)

Complaint:

The plaintiff/claimant in this matter asks for a judicial decision on the forfeiture of the defendant motor vehicle pursuant to Minn. Stat. §169A.63 claiming the vehicle was improperly seized for the following reasons: (Specify why you are making this claim and your interest in the vehicle seized. Use additional sheet(s) if necessary.)

- 1.
2.
3.

Dated:

Signature (Sign only in front of notary public or court administrator.)

Name:

Sworn/affirmed before me this
day of

Address:

City/State/Zip:

Telephone:

Notary Public \ Deputy Court Administrator