



Salvage Transmittal For
Insurance Company/Salvage Pool
Idaho Transportation Department

ITD 3206 (Rev. 1/24)
dmv.idaho.gov

Insurance Company/Salvage Pool Name	Salvage Address	Date Mailed
-------------------------------------	-----------------	-------------

Standard Fee = \$14.00 • Submit a separate check for each transmittal page

	Owner Name (last, first)	Make	Year	Vehicle/Hull Identification Number	Fees
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Number of Items _____ Total _____

Do Not Send Cash ~ Credit card purchases are subject to an ITD service fee.

Credit Card Number	Expires	OR	Check Number

Send original and one copy to: (Keep a copy for your records.) Enclose a self-addressed stamped envelope so we can return your copy and a receipt to your company. Otherwise you will not receive a receipt.

Idaho Transportation Department
Mail to: PO Box 34
Boise ID 83707-0034

OR

Email to:
itdsalvagedesk@itd.idaho.gov

Department Use Only	Date Processed	Processed By	Number of Certificates