See Instructions (FOR201) for help in filling out this form.

State of Minnesota	District Court
County of:	Court File Number:
Judicial District:	Case Type: <u>Civil – Forfeiture</u>
Plaintiff/Claimant Name: Address: City/State/Zip:	
VS	
Defendant (Vehicle)	
c/o Prosecuting Authority:	
Address:City/State/Zip:	
Alcohol-Related Offer	ation of Forfeiture of Motor Vehicle use (District Court) (FOR202) § 169A.63, subd. 8
•	a judicial determination on the forfeiture of the Stat. § 169A.63 claiming the vehicle was improperly
1. The following motor vehicle was seized of	on or about (date):
a. Year:	
b. Make:	
	IN):
e. License Plate Number:	State:
f. Value of Vehicle:	

2.	I claim an interest in or connection to the vehicle because:		
3.	I believe the vehicle was improperly seized because:		
4.	I have the following affirmative defenses (if non, state "none"):		

Acknowledgment

By presenting this form to the court, I certify that to the best of my knowledge, information, and belief, the following statements are true. I understand that if a statement is not true, the court can order a penalty against me (such as to pay money to the other party, pay court costs, and/or other penalties).

- 1. The information I included in this form is based on facts and supported by existing law.
- 2. I am not presenting this form for any improper purpose. I am not using this form to:
 - a. Harass anyone;
 - b. Cause unnecessary delay in the case; or
 - c. Needlessly increase the cost of litigation.
- 3. No judicial officer has said I am a frivolous litigant.
- 4. There is no court order saying I cannot serve or file this form.

- 5. This form does not contain any "restricted identifiers" or confidential information as defined in Rule 11 of the General Rules of Practice

 (https://www.revisor.mn.gov/court rules/gp/id/11/) or the Rules of Public Access to Records of the Judicial Branch (https://www.revisor.mn.gov/court rules/rule/ra-toh/).
- 6. If I need to file "restricted identifiers," confidential information, or a confidential document, I will use Form 11.1 and/or Form 11.2, as required by Rule 11.

I declare under penalty of perjury that everything I have stated in this document is true and

correct. Minn. Stat. § 358.116		
Date:		
·	Signature of Plaintiff/Claimant	
	Name:	
County and state where signed:	Address:	
	City/State/Zip:	
	Phone:	
	Email:	