

State of Minnesota

County _____

District Court

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

(Vehicle Seized-Year, Make, Model)

v _____

(VIN #)

(Plate #) Defendant

To: _____

(list the prosecuting authority that initiated the forfeiture)

STATE OF MINNESOTA)
) SS
COUNTY OF _____)

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. _____

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated: _____

Signature

Name: _____

Address: _____

City/State/Zip: _____

Telephone: () _____

E-mail address: _____