



Arc Northland
Vehicle Donation Form

* Please complete and fax this form to 218-726-4732 or e-mail to jtorgerson@arcnorthland.org.
* You will be contacted within five to six business days.

Date _____

Donor Name _____

Vehicle Location _____

City _____ State _____ Zip _____

Phone # _____ Alternative # _____

Mailing Address (if different than above) _____

City _____ State _____ Zip _____

Vehicle Information:

Year _____ Make _____ Model _____

License # _____ Vin # _____

Please check all that apply: 2-Door 4-Door Station-Wagon 4-Wheel-Drive

Does the vehicle run and drive as is? Yes No, please explain _____

Do you have the Title? Yes No, please explain _____

Please note any problems/damage:

Engine _____

Trans. _____

Tires _____

Body _____

Other _____

Special Instructions: _____

