

How to fill out SFN 61999 — Certificate of Vehicle Identification Number (VIN) Inspection

North Dakota · written against SFN 61999 (4-2026), issued under NDCC 39-05-20.2, cited at the head of the form; the qualified-business requirement is subsection 3

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certificate-of-vin-inspection/

The narrower companion to the equipment inspection, and the one that answers a single question: is there a vehicle identification number physically on this vehicle, and what does it say? The motor vehicle inspection certificate points here in its own header note. The form is built around a twenty-cell comb numbered 1 to 20 into which the inspector prints the number character by character, a location choice with nine options including NO VIN FOUND IN ANY LOCATION, and a certification that the number is permanently affixed. A department-use block at the foot is where an assigned VIN would be recorded.

This sheet is not the form. Download the blank SFN 61999 from the North Dakota Department of Transportation, Motor Vehicle Division at <https://dot.nd.gov/forms/sfn61999.pdf> — always take the current revision from the agency rather than a copy. Print this and keep it beside you while you complete theirs.

Every line, in the order you meet it

1	YOU	Owner Name, telephone and address	Your name, a contact number and your full mailing address at the head of the form. Watch out: Use the name that will appear on the title application. This certificate is filed with it.
2	YOU	Driver's License or ID Number, and issuing state	Your identification number and the state or jurisdiction that issued it. Watch out: For a North Dakota resident this doubles as part of the residency proof the untitled-vehicle package requires.
3	YOU	Year, Make and Model	The vehicle details, with the model as described on the manufacturer label. Watch out: The form asks for the manufacturer label wording specifically. On an older vehicle that can differ from what the model is generally called.
4	YOU	Vehicle Type	One of seven - passenger or pickup, truck or semi-tractor, motorcycle, trailer, ATV, UTV or off-highway, snowmobile, or other. Watch out: Pick the one the department will register the vehicle as. Off-highway and snowmobile follow a different registration path entirely.
5	OTHER	VIN Location	Where the inspector actually found the number, from nine options - including no VIN found in any location. Watch out: The inspector ticks this, not you, because the certification is that they personally viewed the number in the location described.
6	OTHER	The numbered comb	The number printed one character per cell across twenty numbered boxes, legibly, by the inspector. Watch out: Watch it being written. An erasure voids the form outright, and a transposed character on a vehicle with no title is a genuine obstacle rather than a typo.
7	OTHER	Name of Qualified Business, date and address	The garage's name printed legibly, the inspection date and its full address. Watch out: Collect the Secretary of State filing at the same visit. Both inspection certificates need the same proof and the same business can usually supply both.
8	OTHER	Inspector Name, signature and date	The individual who performed the inspection, above the three certifications and the void-on-alteration warning. Watch out: The department-use block below the signature is not part of this - Assigned VIN and staff initials are completed in Bismarck for a vehicle that has no number of its own.

What gets this one rejected

- An owner filling in the comb. The three certifications turn on the inspector having personally viewed the number and recorded it accurately - it is not a transcription exercise.
- A location ticked that the number is not actually in. The certification names the location described above, and the permanence requirement is tested at that spot.
- Correcting a mis-keyed character. The footer voids the form for an erasure, alteration, mutilation or other defacement, exactly as the certificate of title does - a fresh sheet is the answer.
- Filling the department-use block. Assigned VIN and the staff initials belong to the Motor Vehicle Division, and a vehicle needing an assigned number needs the department, not the garage.
- Expecting it to replace the equipment inspection. They are two forms with two jobs, and the untitled-vehicle package can need both.

☒ Amber is what you write ☐ Grey is a block somebody else completes The completed example follows overleaf.

CERTIFICATE OF VEHICLE IDENTIFICATION NUMBER (VIN) INSPECTION

North Dakota Department of Transportation, Motor Vehicle
SFN 61999 (4-2026)

MOTOR VEHICLE DIVISION
ND DEPT OF TRANSPORTATION
608 E BOULEVARD AVE
BISMARCK ND 58505-0780
Telephone (701) 328-2725
Website: <https://dot.nd.gov>

Inspection must be performed by a qualified business that is registered and in good standing with the Secretary of State, and offers motor vehicle repair services to the public (NDCC 39-05-20.2). Note: Incomplete or illegible forms will not be accepted.

Vehicle Owner

Owner Name (First Middle Last) <i>Marlys J. Thorsrud</i>	Contact Telephone Number <i>(701) 555-0146</i>
Mailing Address <i>1427 Chestnut St</i>	City <i>Grand Forks</i>
State <i>ND</i>	ZIP Code <i>58201</i>
Driver's License / ID Number <i>4180263</i>	Driver's License / ID Issuing State or Jurisdiction <i>North Dakota</i>

Vehicle Details

Year <i>1978</i>	Make <i>Chevrolet</i>	Model (as described on manufacturer label) <i>C10 Custom Deluxe</i>
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Vehicle Type (choose one)

☒ Passenger/Pickup
 ☐ Truck / Semi-Tractor
 ☐ Motorcycle
 ☐ Trailer
 ☐ ATV/UTV/Off-Highway
 ☐ Snowmobile
 ☐ Other

Inspection

VIN Location (choose one)

☐ NO VIN FOUND IN ANY LOCATION
 ☐ Engine
 ☐ Dashboard/Visible through windshield
 ☐ Engine Compartment
 ☒ Body - left (driver side)
 ☐ Trunk
 ☐ Body - right (passenger side)
 ☐ Frame
 ☐ Other

VIN must be permanently affixed to vehicle in the location described above at the time of inspection

Vehicle Identification Number (VIN) found on vehicle (Print or type - must be legible)

<i>C</i>	<i>C</i>	<i>L</i>	<i>1</i>	<i>4</i>	<i>8</i>	<i>F</i>	<i>3</i>	<i>2</i>	<i>6</i>	<i>1</i>	<i>0</i>	<i>4</i>							
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20

Certification

Name of Qualified Business Performing Inspection (print legibly) <i>Bakken Ridge Auto Service</i>	Date of Inspection <i>05/22/2026</i>
Business Address <i>3110 Gateway Dr</i>	City <i>Grand Forks</i>
State <i>ND</i>	ZIP Code <i>58203</i>
Inspector Name (print name of individual performing inspection) <i>Dale W. Fossum</i>	
Signature of individual / employee of qualified business By my signature below I am certifying all of the following to be true and correct: 1.) The vehicle was physically in my presence at the time of inspection 2.) If a VIN is entered above, the VIN is permanently affixed to the vehicle 3.) I personally viewed the VIN affixed to the vehicle in the location described above and recorded the VIN accurately on this form	
Signature <i>Dale W. Fossum</i>	Date <i>05/22/2026</i>

Erasures, alterations, mutilation, or other defacement voids this form

THIS SECTION FOR MVD USE ONLY

ASSIGNED VIN <i>ND</i>	Initials of MVD Staff issuing / assigning VIN	Date
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