



**DONATION**  
**DIVISION**

# Vehicle Donation Form

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\*Completed form can be email to [DDCGroup@iaai.com](mailto:DDCGroup@iaai.com), or fax form to 207-426-9034  
\*The donor will be contacted within 2 business days.

Date: \_\_\_\_\_

Charity: \_\_\_\_\_

### **Donor Information:**

Donor Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

### **Vehicle Information:**

Year: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_

VIN #: \_\_\_\_\_ Mileage: \_\_\_\_\_

Title Available:

Drivable: