

MAIL PROCESSING SERVICE AGREEMENT



SENDER CONTACT INFO

First Name: _____ Last Name: _____

Phone: _____ Email: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

* An email notification will be sent when your package has been received and reviewed. An additional email will be sent with the return tracking number for your convenience. It is your responsibility to track your package.

VEHICLE OWNER INFO If you are not the actual owner please let us know who is.

First Name: _____ Last Name: _____

Phone: _____ Email: _____

FEDEX RETURN SHIPPING⁺ INFO ☐ Same as Sender Contact

First Name: _____ Last Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

⁺ UMV ships all packages via FedEx. FedEx requires a physical street address.
We will email you the FedEx tracking number so you may track your own package.

FEE SCHEDULE

UMV Mail Processing Fee is \$200 per transaction; FedEx shipping fee is FedEx Fee + \$25. Customer provided Prepaid USPS or UPS packages will be assessed an additional \$10 fee for delivery to the mail distribution site. Holding for Client In-Person processing is \$50. A \$50 handling fee will be charged for incomplete packages. After 10 business days, incomplete packages or work that cannot be processed will be charged the \$50 return shipping fee plus the \$50 handling fee, and returned to the sender. Additional State of Alaska DMV charges will apply on all processed transactions.

Signature Authorization Required _____

VISA / Mastercard AUTHORIZATION

Name on Card: _____

CC#: _____ Exp: ____/____ CVC: _____

Company: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

I authorize UMV, LLC to charge my credit card for DMV related fees, UMV Convenience fees, and shipping costs. I understand I will receive a line item receipt for charges incurred. I certify I am an authorized user of the credit card listed above and I authorize UMV, LLC to charge my account.

Cardholder Signature _____ Date _____

IMPORTANT

To ensure the accuracy of required information, email your complete package to mp@umvak.com. We will review and respond with any needed changes and associated costs. Please allow one (1) business day for a response.

Send all ORIGINAL DOCUMENTS to:

UMV - Mail Processing Department
1008 W Northern Lights Blvd
Anchorage, AK 99503

Please use a shipping method that allows you to track your package. We will contact you once your package has been reviewed and after your transaction is completed.

Submittal Checklist

Please follow the instructions on our website for your specific request or transaction as not all documents listed here are applicable to every transaction.

- ☐ UMV Mail Processing Svc Agreement
 - ☐ Fee Schedule Signed
 - ☐ CC Info Complete and Signed
 - ☐ Documents signed by a Power of Attorney must include a statement that the Appointer authorizes the attorney-in-fact to sign the odometer disclosure statement.
 - ☐ Vehicle Transaction Application
 - ☐ Original Title or Manufacturer Certificate of Origin
 - ☐ Military LES for current month (if registered owner is military)
 - ☐ Original / Certified Power of Attorney (if used to sign any documents)
 - ☐ Copy of Current Valid Driver's License
- Payment Type Enclosed (2 Options):**
- ☐ Business Check*payable to: **UMV LLC**
***personal checks not accepted**
 - ☐ Credit Card Payment