

Mail to: WEST VIRGINIA STATE POLICE  
TRAFFIC RECORDS  
701 JEFFERS ROAD  
SOUTH CHARLESTON, WV 25309  
Email to: WVMVI@WVSP.GOV  
Fax to: 304-746-2206



## OFFICIAL WEST VIRGINIA COMMERCIAL STATION APPLICATION

(PRINT OR TYPE ALL INFORMATION IN FULL OR APPLICATION WILL BE RETURNED)

STATE OF WEST VIRGINIA  
COUNTY OF: \_\_\_\_\_ OFFICIAL INSPECTION NUMBER \_\_\_\_\_

STATION NAME: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

BUSINESS PHONE: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

How long has your station been conducting official state inspections? \_\_\_\_\_

Has your license as an Official Inspection Station ever been revoked or suspended?  
\_\_\_\_\_ YES \_\_\_\_\_ NO If yes, Date of last suspension \_\_\_/\_\_\_/\_\_\_ Duration: \_\_\_\_\_

Have you ever been arrested for any crime, convicted of any crime, passed a worthless check to any business or person, been a defendant in a civil lawsuit or filed for bankruptcy in the past seven (7) years?  
\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, attach a detailed letter of explanation to this application.

Do you pledge yourself and your employees to conduct honest, thorough, and efficient inspections in accordance with the Code of West Virginia and Official Inspection Regulations?  
\_\_\_\_\_ Yes \_\_\_\_\_ No

Authorized Signature: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE**

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APPROVED: \_\_\_\_\_ YES \_\_\_\_\_ NO DATE: \_\_\_/\_\_\_/\_\_\_ SIGNED: \_\_\_\_\_