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Prescribing Directive

CERTIFICATE OF NONDELIVERY OF VEHICLE

(AE Reg 190-1/CNE-CNA-C6F Inst 11240.6Y/USAFE-AFAFRICA Inst 31-202)

I, _____ **, registered at the**
(Name of registrant)

_____ **Station on** _____ **under**
(Community) (Date (YYYYMMDD))

_____ **a** _____ _____ **,**
(Registration number) (Year) (Make of vehicle)

_____ **,** _____ **, which was**
(Body type) (Chassis number)

purchased from _____
(Company name)

I certify that the aforementioned vehicle was never delivered. For registration purposes, this statement will serve to indicate either a chassis number change in the event I agree to accept another vehicle or a cancellation of a purchase order with the company. If cancelled, a lien release is required.

_____
(Date (YYYYMMDD))

_____
(Signature of registrant)

_____
(Printed name of company representative)

_____
(Signature of company representative)

Company stamp
or
business card.

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(Date (YYYYMMDD))

_____
(Signature of registrant)

_____
(Printed name of company representative)

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Company stamp
or
business card.

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