Hidaya Foundation www.hidaya.org Tax ID#: 77-0502583	**Hidaya Foundation** **Car Donation Form**	**Headquarters** P.O. Box 5481 Santa Clara, CA 95056 Toll Free: (866) 244-3292 mail@hidaya.org

Section 1: Instructions

1. Please fill out the Donor and Vehicle Information
2. When complete, please fax this form to (866) 344-3292 or (866) 3-HIDAYA, or mail to P.O. Box 5481 Santa Clara, CA 95056-5481 or scan and e-mail at mail@hidaya.org
3. A towing service will call you within a few business days to schedule an appointment
4. Please make sure that you submit a completed notice of transfer and release of liability form to the DMV within five days (DMV Form # REG 138)
5. For information on receiving a tax deduction on your car donation, visit: www.irs.gov/pub/irs-tege/pub4303.pdf

Section 2: Donor Information

Date: _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____ Alternative _____ E-mail _____

Section 3: Vehicle Information:

Year _____ Make _____ Model _____ □ DX □ EX □ LX □ Other_____

Car License # _____ VIN # _____

Please check all that apply: □ 2-Door □ 4-Door □ Sedan □ Coupe

□ Station-Wagon □ 4-Wheel-Drive □Hatch Back □ Sports Utility

Odometer Reading _____ Color _____ Transmission: □ Automatic □ Manual

Does the vehicle run and drive as is? □ Yes □ No, please explain _____

_____

Does the car require any repairs? □ Yes □ No, please explain _____

Repairs performed (to date), please explain _____

Vehicle Condition:	Body Damage:	Problems:	
□ Excellent	□ Front End	Engine	_____
□ Good	□ Rear End	Transmission	_____
□ Fair	□ Drivers Side	Interior	_____
□ Poor	□ Passenger Side	Tires	_____
□ Very Poor	□ Rust	Other	_____

Do you have the Title? □ Yes □ No, please explain _____

Special Instructions (if any): _____

_____

Signature _____