

**ORDER: ACCEPT INSURANCE PAYMENT FOR WRECKED VEHICLE AND  
APPROVE DELETION OF ASSET**

Motion was made by John Morgan, duly seconded by Greg Bynum, to accept Insurance payment for wrecked.


The vote on the motion was as follows:

Supervisor Brent Larson, voted yes  
Supervisor John Morgan, voted yes  
Supervisor Tim Gordon, voted yes  
Supervisor Scott Allen, voted yes  
Supervisor Greg Bynum, voted yes

After the vote, President Larson, declared the motion carried, this the 20<sup>th</sup> day of February, 2024.



**Brent Larson, President  
Board of Supervisors**



**Mike Roberts, Chancery Clerk**

## Lisa Carwyle

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**From:** Valerie Woods <valerie.woods@ccmsi.com>  
**Sent:** Wednesday, February 7, 2024 10:27 AM  
**To:** Lisa Carwyle  
**Subject:** FW: Lafayette County 2015 Dodge Ram- DOL 1/17/24 - 24F39M016663  
**Attachments:** MS POA.pdf; Odometer\_Statement.pdf

**From:** Valerie Woods  
**Sent:** Wednesday, February 7, 2024 4:30 AM  
**To:** Lisa Carwyle <LCarwyle@lafayettecoms.com>  
**Subject:** Lafayette County 2015 Dodge Ram- DOL 1/17/24 - 24F39M016663

Hi Lisa

This vehicle has come back as a total loss.

The SOV is \$15,000. There is a \$1,000 deductible.

If the county does not want to retain the salvage, we will issue payment in the amount of \$14,000.

If the county does want to retain the salvage, we will deduct the high salvage bid of \$4,500 from that amount as well.

Please let me know if the county will or will not retain the salvage.

Regardless, the 2 attached forms will need to be executed and returned along with the original title in order for us to issue payment. Please only sign the back of the title where it says SELLER.

On the Power of Attorney, fill out everything except where it says "owner of the following described motor vehicle, have made, constituted and appointed and by these present do make, constitute and appoint" – just leave that section blank.

*Valerie Woods*

**Valerie Woods**  
**CCMSI | Claim Consultant**

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PO Box 1378  
Ridgeland, MS 39158  
**Phone:** 601.608.1039  
**Fax:** 601.899.0160  
[www.ccmsi.com](http://www.ccmsi.com)

# CERTIFICATE OF TITLE

Form # 79-001

## STATE OF MISSISSIPPI

**ORIGINAL**

VEHICLE IDENTIFICATION NUMBER

1C6RR7XT6FS599237

MAKE

RAM

YEAR

2015

MODEL

1500

BODY

PK

TITLE NUMBER

MSL135660544

TITLE TEXT  
(E.G. UNIT #)

TITLE DATE

10/20/2021

DATE OF FIRST SALE  
FOR USE NEW ONLY

NO. CYL

NEW/USED

USED

TYPE OF VEHICLE

PU

ODOMETER - NO TENTHS

60000

ACTUAL

OWNER(S)

LAFAYETTE COUNTY SHERIFF'S DEPT  
711 JACKSON AVE E  
OXFORD MS 38655-3815

BRANDS

1ST LIENHOLDER

DATE:

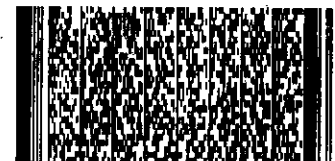
2ND LIENHOLDER

DATE:

MAIL TO

LAFAYETTE COUNTY SHERIFF'S DEPT  
711 JACKSON AVE E  
OXFORD MS 38655-3815

T3



LIEN SATISFACTION: THE UNDERSIGNED HOLDER OF ABOVE DESCRIBED LIEN(S) ON THE MOTOR VEHICLE DESCRIBED HEREON HEREBY ACKNOWLEDGES SATISFACTION THEREOF.

1ST LIEN

(LIENHOLDER)

BY

(SIGNATURE AND TITLE)

THIS

DAY OF

20

2ND LIEN

(LIENHOLDER)

BY

(SIGNATURE AND TITLE)

THIS

DAY OF

20

IN WITNESS WHEREOF I HAVE HEREUNTO SET MY HAND THIS

THE 20TH

DAY OF OCTOBER

20 21



The Mississippi Department of Revenue hereby certifies that on application duly made, the person named herein is registered by this office as the lawful owner of the vehicle described subject to the liens or security interests as may subsequently be filed with the Mississippi Department of Revenue. This certificate of title is issued pursuant to the Mississippi Motor Vehicle Title Law, Section 63-21-1, Mississippi Code of 1972, and subject to the provisions thereof.

CONTROL NUMBER

0 034 78806

MISSISSIPPI DEPARTMENT OF REVENUE

VOID IF ALTERED