



APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE

FEE \$14.00

APPLICATION SHOULD BE PRESENTED TO ANY DESIGNATED COUNTY OFFICIAL

APPLICATION FOR ORIGINAL CERTIFICATE OF TITLE SHOULD BE MADE ON THE REVERSE SIDE.

The applicant(s) for certified copy of a Certificate of Title is the: Owner(s) Lienholder(s)
of said vehicle, and the Original Certificate of Title has been:
 Lost Destroyed Mutilated

VEHICLE INFORMATION

_____ Title Number _____ Vehicle Identification Number

_____ Year _____ Make _____ Model

APPLICANT(S) INFORMATION

Last Name First Name Middle Initial

Last Name First Name Middle Initial

Last Name First Name Middle Initial

Address (Street or RR and PO Box) City State Zip

Mailing Address (If other than above)

NOTARIZATION

Signature of Applicant

Signature of Applicant
Subscribed and sworn before me the _____ day
Of _____ .

Signature Notary Public or Designated County Official
My commission expires on _____ .

Signature of Applicant

Signature of Applicant
Subscribed and sworn before me the _____ day
Of _____ .

Signature Notary Public or Designated County Official
My commission expires on _____ .

SEAL

SEAL

NOTE: APPLICATION IS VOID UNLESS SIGNED BY APPLICANT(S) AND PROPERLY NOTARIZED.