

## MINNESOTA DEPARTMENT OF PUBLIC SAFETY DRIVER AND VEHICLE SERVICES

## APPLICATION FOR DUPLICATE TITLE, REGISTRATION, CAB OR LIEN CARD

PLEASE READ THE INSTRUCTIONS AT THE BOTTOM OF THIS PAGE BEFORE COMPLETING

| D. Illingto |                     | ADE NOT          | a                  |                   |
|-------------|---------------------|------------------|--------------------|-------------------|
| Duplicate   | plates and stickers | ARE NOT required | d when applying to | r duplicate title |

EOR OFFICE USE ONLY

| TITLE NUMBER OF MISSING DOCUMENT  |                     | VEHICLE IDENTIFICATION NUMBER |               |   | <u> </u>                  |               |                  | 1         |            |         |          |
|---|---------------------|-------------------------------|---------------|---|---------------------------|---------------|------------------|-----------|------------|---------|----------|
| PLATE NUMBER  | PLATE YR            | MAKE                          | MOD. YR       |   |                           |               |                  |           |            |         |          |
|   |                     |                               |               |   |                           |               |                  | FOR CENTR | AL OFFICE  | USE O   | NLY      |
|   | RST<br>WNER         | LAST, FIRS                    | AND MIDDLE    |   |                           | DRIVER'S L    | CENSE NU         | MBER      | DATE (     | OF BIRT | Н        |
|   | DDITIONAL<br>WNER'S | LAST, FIRS                    | T AND MIDDLE  | DRIVER'S LICENSE NUMB                             |                           | MBER          | BER DATE OF BIRT |           | Ή          |         |          |
| PRINT ADDRESS OF<br>FIRST OWNER<br>(PERMANENT ADDRES  | SS)                 | STREET                        |               |   | CITY                      | COUNTY        |                  |           | STATE      | Z       | IP       |
| THIS APPLICATIO   | N IS FOR A I        | DUPLICATI                     | E (Please che | eck one): 🔲 Title 🔲 Reg.                          | Card 🔲 Cab Card           | Lien Card     |                  |           |            | ·       |          |
| Check the box tha   | at indicates w      | hy the doc                    | ument must    | be replaced:                                      |                           |               |                  |           | FEE        | S D     | UE       |
| STOLEN  |                     |                               | MUTILATED     | <ul> <li>Attach the mutilated document</li> </ul> |                           |               |                  |           |            | \$      | ¢        |
| DESTROYED     ILLEGIBLE – Attach the illegible document   |                     |                               |               |   |                           |               | DUPLICATE        |           |            |         |          |
| LOST INOT RECEIVED (Your lending institution or the postal service may have the missing document) |                     |                               |               |   |                           |               |                  |           |            |         |          |
| GIVEN TO BI   | UYER (SELLE         | ER IS FILIN                   | G AFFIDAVIT   | OF SALE)  |                           |               |                  | FIL       | ING        |         |          |
|   |                     |                               |               |   |                           |               |                  |           |            | \$      | ¢        |
|   |                     |                               |               |   |                           |               |                  | то        | TAL        |         |          |
| Temporary A<br>Attach a SELF-A  |                     | D, STAMP                      | ED ENVEL      | OPE if the document must                          | be sent to a temporary    | / address, an | d print tl       | hat addro | ess here   | :       |          |
| STREET  |                     | -                             |               | 1   | TY                        |               |                  | 1         | TATE       | ZIP     |          |
| Please Check  | one:                | Applica                       | nt is the Ow  | ner (if jointly owned, only one                   | e owner's signature is re | quired)       |                  |           | olicant is | Secure  | ed Party |

I certify that all of my declarations are true and correct. I am the owner or secured party of this vehicle and the original document has not been assigned and/or surrendered to anyone.

| X<br>Applicant(s) signature(s)               |                  | X<br>Applicar  | nt(s) signature(s)  | DATE                                   |  |  |  |
|--|------------------|----------------|---|--|--|--|--|
| Title of Agent if Applicant is Secu          | ired Party:      |                |   |  |  |  |  |
| LIEN RELEASE – Print<br>SECURED PARTY'S NAME | name and address | of lien holder | - NOTICE -<br>Secured party's signature<br>must be notarized to release                       | Subscribed and sworn to before me this |  |  |  |
| STREET ADDRESS                               | MINNESOTA        | A TAX ID NO.   | a lien.   | Day of 20                              |  |  |  |
| CITY   | STATE            | ZIP CODE       | The se cured party named no longer claims a security interest in the vehicle described above. | NOTARY PUBLIC                          |  |  |  |
| SIGNATURE AND TITLE OF AUTH                  |                  |                |   | COUNTY                                 |  |  |  |
| x  |                  |                | Date of Release:  | MY COMMISSION EXPIRES                  |  |  |  |

## INSTRUCTIONS: PLEASE READ CAREFULLY BEFORE COMPLETING

Duplicate plates and stickers **ARE NOT** required when applying for a duplicate title, registration/cab card or lien card. You only need to complete this side of the form. Fees: Please contact DVS or your local deputy registration to determine fees or for assistance in completing this form. If you are applying by mail, make remittance payable to: 1

2. Driver and Vehicle Services.

## IMPORTANT NOTICE: PLEASE READ

DVS will issue a duplicate certificate of title only to the owner or legal representative (power of attorney is required) of the owner named on the original certificate. If the original certificate of title is recovered, it must be returned to DVS.

All data collected on a motor vehicle application are required by law. These data are used to identify your motor vehicle. Failure to provide required data may result in denial of the transfer of ownership, registration of this vehicle, or other requested action. Except for certain uses permitted by federal and state laws, personal information contained in your application may not be disclosed to anyone without your express consent.