



# APPLICATION FOR DUPLICATE OR PAPERLESS TITLE

DMV USE ONLY		
DL/ID #	STATE	TECH. INITIALS

- Duplicate Title (Complete Sections 1 - 3)     Paperless Title Certification (Complete Sections 1 - 3)  
 Transfer of Title with Duplicate or Paperless Title (Seller completes Sections 1 - 4, New Owner completes Sections 6 and 7, as needed.)

VEHICLE LICENSE PLATE OR VESSEL CF NUMBER	VEHICLE/HULL IDENTIFICATION NUMBER	YEAR/MAKE OF VEHICLE OR VESSEL BUILDER
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### SECTION 1 — REGISTERED OWNER(S) OF RECORD — Please print name as it appears on the Title/Registration.

TRUE FULL NAME (LAST, FIRST, MIDDLE, SUFFIX), BUSINESS NAME, OR LESSOR	DRIVER LICENSE/ID CARD NUMBER	STATE
CO-OWNER TRUE FULL NAME (LAST, FIRST, MIDDLE, SUFFIX)	DRIVER LICENSE/ID CARD NUMBER	STATE
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST., AVE., ETC.) APT./SPACE/STE. # CITY	STATE	ZIP CODE
COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRINCIPALLY GARAGED		
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY	STATE	ZIP CODE

### SECTION 2 — LEGAL OWNER OF RECORD (LIENHOLDER/TITLE HOLDER) — Do not enter name of owners above.

NAME OF BANK, FINANCE COMPANY, OR INDIVIDUAL HAVING A LIEN ON THIS VEHICLE	ELECTRONIC LIENHOLDER ID NUMBER
BUSINESS OR RESIDENCE ADDRESS APT./SPACE/STE. # CITY	ELT # STATE ZIP CODE

### SECTION 3 — MISSING TITLE STATEMENT — WARNING: Issuance of a duplicate title cancels the original title.

- The Certificate of Title issued for this vehicle/vessel is (check box):  
 Lost     Stolen     Paperless Title  
 Not Received from Prior Owner     Not Received from DMV (Allow 30 days from issue date)     Illegible/Mutilated (Attach old title)

**I agree to indemnify and save harmless the Director of Motor Vehicles for any loss suffered resulting from the issuance of said duplicate Certificate of Title. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		( )

### SECTION 4 — REGISTERED OWNER(S) RELEASE OF OWNERSHIP AND/OR INTEREST

**I/we release interest in the described vehicle/vessel. NOTE:** The signature of **EACH** owner is required if co-owners are joined by **AND** (shown by / on DMV records). The signature for a company or business **MUST** include the printed name of the company/business and an authorized representative's countersignature on the signature line (e.g., ABC CO., by JOHN SMITH - or - JOSEPH SMITH for ABC CO).

PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		( )
PRINTED NAME OF OWNER	SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
	X		( )

### SECTION 5 — LEGAL OWNER OF RECORD RELEASE OF OWNERSHIP AND/OR INTEREST — Must be notarized.

**The undersigned lienholder (legal owner of record) certifies release of interest in the vehicle/vessel. For vehicles 2 model years old and newer, the legal owner (i.e., bank, finance company, etc.) of record must apply for a duplicate title first, and then release interest on the actual title. This section and the Lien Satisfied (REG 166) form cannot be used.**

PRINTED NAME OF AUTHORIZED AGENT SIGNING FOR COMPANY	TITLE OF AUTHORIZED AGENT SIGNING FOR COMPANY	DAYTIME TELEPHONE NUMBER
		( )
SIGNATURE OF LEGAL OWNER (COMPANY NAME AND AUTHORIZED AGENT'S COUNTERSIGNATURE)		DATE
X		

### NOTARY USE ONLY

State of California  
County of \_\_\_\_\_  
On \_\_\_\_\_  
before me, \_\_\_\_\_,  
(HERE INSERT NAME AND TITLE OF THE OFFICER)  
personally appeared \_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.  
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.  
WITNESS my hand and official seal.  
SIGNATURE \_\_\_\_\_

(SEAL)

**THIS SIDE FOR NEW OWNERS – EACH NEW OWNER MUST SIGN BELOW**  
 Complete transfer within 10 days of taking possession of vehicle/vessel.

**Must complete vehicle information below:**

VEHICLE LICENSE PLATE OR VESSEL CF NUMBER	VEHICLE/HULL IDENTIFICATION NUMBER	YEAR/MAKE OF VEHICLE OR VESSEL BUILDER
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**SECTION 6 — NEW REGISTERED OWNER(S) — Print true full name as shown on Driver License/Identification Card.**

*If the vehicle was purchased or received from a qualified relative [parent/child, grandparent/grandchild, spouse, domestic partner, siblings (must be minors, related by blood or adoption)], a Statement of Facts (REG 256) form, Statement of Use Tax Exemption, must also be submitted. Once registered, to sell, gift, or otherwise transfer ownership, co-owners joined by “AND (I)” require the signature of each owner; co-owners joined by “OR” require the signature of only one owner.*

*The signature for a company or business MUST include the printed name of the company/business and an authorized representative's countersignature on the signature line (e.g., ABC CO., by JOHN SMITH - or - JOSEPH SMITH for ABC CO.).*

DATE PURCHASED OR ACQUIRED Mo. _____ Day _____ Yr. _____	PURCHASE PRICE \$ _____	OR IF RECEIVED AS A GIFT OR TRADE, CHECK APPROPRIATE BOX AND WRITE THE MARKET VALUE: <input type="checkbox"/> Gift <input type="checkbox"/> Trade \$ _____	MARKET VALUE \$ _____
TRUE FULL NAME OF NEW OWNER (LAST, FIRST, MIDDLE, SUFFIX), BUSINESS NAME, OR LESSOR		DRIVER LICENSE/ID CARD NUMBER	STATE
TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) <input type="checkbox"/> AND <input type="checkbox"/> OR		DRIVER LICENSE/ID CARD NUMBER	STATE
TRUE FULL NAME OF CO-OWNER OR LESSEE (LAST, FIRST, MIDDLE, SUFFIX) <input type="checkbox"/> AND <input type="checkbox"/> OR		DRIVER LICENSE/ID CARD NUMBER	STATE
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST., AVE., ETC.) APT./SPACE/STE. # CITY		STATE	ZIP CODE
COUNTY OF RESIDENCE OR COUNTY WHERE VEHICLE/VESSEL IS PRINCIPALLY GARAGED		EQUIPMENT NUMBER (OPTIONAL)	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY		STATE	ZIP CODE
LESSEE ADDRESS (IF DIFFERENT FROM ADDRESS ABOVE)			
VESSEL OR TRAILER COACH PRINCIPALLY KEPT AT (ADDRESS OR LOCATION - IF DIFFERENT FROM PHYSICAL/BUSINESS ADDRESS ABOVE)			COUNTY

**The above owner mailing address is valid, existing, and an accurate mailing address. I consent to receive service of process at this mailing address pursuant to Section 1808.21 of the California Vehicle Code. I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.**

SIGNATURE(S) OF ALL NEW OWNER(S) <b>X</b>	DATE	DAYTIME TELEPHONE NUMBER ( )
SIGNATURE(S) OF ALL NEW OWNER(S) <b>X</b>	DATE	DAYTIME TELEPHONE NUMBER ( )
SIGNATURE(S) OF ALL NEW OWNER(S) <b>X</b>	DATE	DAYTIME TELEPHONE NUMBER ( )

**SECTION 7 — NEW LEGAL OWNER (LIENHOLDER/TITLE HOLDER) — If none, write “None.”**

Attention ELT Legal Owners: ELT # must be shown and the name and address **must** be entered **exactly** as shown on the ELT listing.

TRUE FULL NAME OF BANK/FINANCE COMPANY OR INDIVIDUAL — DO NOT RE-ENTER NAME OF NEW REGISTERED OWNER(S) ABOVE	ELECTRONIC LIENHOLDER ID NO. ELT# _____
PHYSICAL RESIDENCE OR BUSINESS ADDRESS (INCLUDE ST., AVE., ETC.) APT./SPACE/STE. # CITY	STATE ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM ABOVE) APT./SPACE/STE. # CITY	STATE ZIP CODE

**SECTION 8 — DEALER’S RELEASE OF ACQUIRED VEHICLE**

NAME OF DEALERSHIP	NAME OF BUYER	DATE SOLD	R/S NUMBER
SIGNATURE OF DEALER AGENT <b>X</b>	PRINTED NAME OF DEALER AGENT	DEALER NUMBER	SALESPERSON NUMBER
NAME OF DEALERSHIP	NAME OF BUYER	DATE SOLD	R/S NUMBER
SIGNATURE OF DEALER AGENT <b>X</b>	PRINTED NAME OF DEALER AGENT	DEALER NUMBER	SALESPERSON NUMBER