STATE OF CALIFORNIA
DEPARTMENT OF MOTOR VEHICLES
A Public Service Agency

APPLICATION FOR DUPLICATE OR TRANSFER OF TITLE

DMV USE ONLY		
DL/ID #	STATE	TECH. INITIALS

This form cannot be used to release a lien on a vehicle with an Electronic Lien Title (ELT)

☐ **Duplicate Title** *(Complete Sections 1 - 3)*

☐ **Transfer of Title with Duplicate** *(**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

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

BUSINESS OR RESIDENCE ADDRESS APT./SPACE/STE. # CITY STATE ZIP CODE

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

If your address is **different** than what appears in the Department's records, you must file this application in person, bring the original or photo copy of proof of ownership (i.e. Registration Card or Registration Renewal Notice), and your Driver License or Identification Card. If the title has been replaced within the last 90 days, a CHP vehicle verification is required.

The Certificate of Title issued for this vehicle/vessel is (*check box)*: ☐ Lost ☐ Stolen ☐ Illegible/Mutilated (*Attach old title*)

☐ Not Received from Prior Owner ☐ Not Received from DMV (*Allow 30 days from issue date*)

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. *This section and the Lien satisfied (REG 166) form cannot be used for non-ELT participants with vehicles 2 model years old or 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.*

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

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

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.

(SEAL)

SIGNATURE _____

Print Clear Form

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

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 (/)***" 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	**PURCHASE PRICE**	*OR IF RECEIVED AS A GIFT OR TRADE, CHECK APPROPRIATE BOX AND WRITE THE MARKET VALUE:*	**MARKET VALUE**
Mo. _____ Day _____ Yr. _____	$	☐ Gift ☐ Trade	$

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*) ☐ AND ☐ OR	DRIVER LICENSE/ID CARD NUMBER	STATE
TRUE FULL NAME OF CO-OWNER OR LESSEE (*LAST, FIRST, MIDDLE, SUFFIX*) ☐ AND ☐ 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)	DATE	DAYTIME TELEPHONE NUMBER
X		( )
SIGNATURE(S) OF ALL NEW OWNER(S)	DATE	DAYTIME TELEPHONE NUMBER
X		( )
SIGNATURE(S) OF ALL NEW OWNER(S)	DATE	DAYTIME TELEPHONE NUMBER
X		( )

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

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