



A Public Service Agency

APPLICATION FOR:

- Duplicate Title (Complete Parts 1 through 3)
- Paperless Title Certification (Complete Parts 1 through 3)
- Transfer of Title With Duplicate Title (Seller completes Parts 1 through 5, Buyer completes Parts 6 through 10, as needed.)
- Transfer of Title With Paperless Title (Seller completes Parts 1 through 5, Buyer completes Parts 6 through 10, as needed.)

LICENSE PLATE/CF NUMBER	VEHICLE/VESSEL ID NUMBER	YEAR/MAKE
-------------------------	--------------------------	-----------

1. REGISTERED OWNER(S) OF RECORD

TRUE FULL NAME (LAST, FIRST, MIDDLE)					TRUE FULL NAME (LAST, FIRST, MIDDLE)							
RESIDENCE OR BUSINESS ADDRESS			APT./SPACE NUMBER		CITY		STATE		ZIP CODE		DRIVER LICENSE/ID CARD NUMBER	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)			APT./SPACE NUMBER		CITY		STATE		ZIP CODE		DRIVER LICENSE/ID CARD NUMBER	

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

NAME OF COMPANY OR INDIVIDUAL HAVING A LIEN ON THIS VEHICLE

ADDRESS	APT./SPACE NUMBER	CITY	STATE	ZIP CODE
---------	-------------------	------	-------	----------

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

The Certificate of Title issued for this vehicle/vessel is:

Lost Stolen Not received Illegible/Mutilated (attach old title) Paperless 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.

SIGNATURE		DATE	DAYTIME TELEPHONE NUMBER
X			
PRINTED NAME OF OWNER/AGENT SIGNING FOR COMPANY		PRINTED NAME OF LEGAL OWNER	

4. REGISTERED OWNER(S) RELEASE OF OWNERSHIP AND/OR INTEREST

I/we release interest in the described vehicle/vessel.

SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
X		
SIGNATURE OF OWNER	DATE	DAYTIME TELEPHONE NUMBER
X		

5. LEGAL OWNER OF RECORD RELEASE OF OWNERSHIP AND/OR INTEREST—Signature must be notarized.

The undersigned lienholder (legal owner of record) certifies release of interest in the vehicle/vessel.

SIGNATURE OF LEGAL OWNER (COMPANY NAME MUST BE COUNTERSIGNED)	PRINTED NAME OF AGENT SIGNING FOR COMPANY	DATE
X		

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 *****

LICENSE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER	YEAR/MAKE
----------------------	-------------------------------	-----------

6. NEW REGISTERED OWNER(S) — Complete transfer within 10 days of taking possession of vehicle/vessel

PURCHASE PRICE OR IF RECEIVED AS A <input type="checkbox"/> GIFT <i>OR</i> <input type="checkbox"/> TRADE, THE MARKET VALUE	DATE PURCHASED OR ACQUIRED Mo. _____ Day _____ Yr. _____	EQUIPMENT NUMBER
TRUE FULL NAME(S) OF NEW OWNER(S) (AS SHOWN ON DRIVER LICENSE OR ID CARD)		DRIVER LICENSE/ID CARD NUMBER
(LAST)	FIRST MIDDLE	_____
<input type="checkbox"/> AND (LAST) FIRST MIDDLE		DRIVER LICENSE/ID CARD NUMBER
<input type="checkbox"/> OR		_____
ADDRESS (INCLUDE ST., AVE., RD., CT., ETC.)	APT./SPACE NUMBER CITY	STATE ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM RESIDENCE ABOVE)	APT./SPACE NUMBER CITY	STATE ZIP CODE

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		
	DATE	DAYTIME TELEPHONE NUMBER
X		

7. NEW LEGAL OWNER (LIEN HOLDER/TITLE HOLDER)

TRUE FULL NAME OF NEW LEGAL OWNER — DO NOT ENTER NAME OF NEW REGISTERED OWNER(S) ABOVE.	ELECTRONIC LIENHOLDER ID NO.
	ELT# _____
STREET OR P.O. BOX ADDRESS	APT./SPACE NUMBER CITY STATE ZIP CODE

8. LEASED VEHICLES

LESSEE ADDRESS (IF DIFFERENT FROM OWNER ADDRESS ABOVE)

9. VESSEL OR TRAILER COACH

VESSEL OR TRAILER COACH PRINCIPALLY KEPT AT (ADDRESS OR LOCATION OF VESSEL OR TRAILER COACH) COUNTY

10. DEALER'S RELEASE OF ACQUIRED VEHICLE

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