

For Office Use Only
Sales Tax Paid: yes no
Lien Released: yes no

**DUPLICATE CERTIFICATE OF TITLE
APPLICATION AND AFFIDAVIT**

**TO: Connie D. Tschetter
 Crook County Clerk
 P.O. Box 37
 Sundance, WY 82729**

I hereby make application for a **duplicate Wyoming Certificate of Title** for the following motor vehicle, trailer or mobile home, as described below:

Owner: _____
 Title Number: _____ VIN: _____
 Make: _____ Year: _____

To the best of my knowledge and belief there are no liens against the vehicle except those liens shown on the original certificate of title. The original title is (check one) **lost { }**, **mutilated { }** or **destroyed { }**. Furthermore, the title has not been assigned to any other person, nor is it in the possession of any other person.

I authorize the duplicate certificate of title be mailed to:

Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____

I hereby swear or affirm **under penalty of perjury** that all of the information on this application for Certificate of Title is true and correct and that I am lawfully applying for a Wyoming Certificate of Title.

Signature of Applicant: _____
 Signature of Applicant: _____

State of _____)
) ss.
 County of _____)

Signed and sworn to (or affirmed) before me on the _____ day of _____, 20____
 by _____.

(Seal)

 County Clerk or Notarial Officer

My Commission Expires:

Fee: Nine Dollars (\$9.00)