Issue	Date:	



Affidavit and Application for obtaining DUPLICATE CERTIFICATE OF TITLE

Fee: Fifteen Dollars (\$15.00)

Bring or Mail Application	on to: Fremont Co	unty Clerk, 450	N. 2nd St. Room 220, Lander WY 825	20		
PAYMENT TYPE: CASI	H CHECK	OR				
			EXP/			
NAME ON CARD			(security code			
I/we hereby, make application home, as described below (ple		g Certificate of Title	e for the following motor vehicle, trailer, watercraft	or mobile		
Name(s) on Title			Daytime Phone#			
Title #:	Year:Make:_	VIN/	/HIN #:			
assigned to or in the possession original Certificate of Title. I hereby make application for a fill out if we are to mail the Dup	on of any other person, a duplicate Certificate of licate Title)	and there are no ad	Title has been mutilated, lost, or destroyed, and the lditional liens on said motor vehicle other than show a said motor vehicle and authorize the same to be made in the same to be ma	wn on the		
Mailing Address:			<u> </u>			
City:	State:	Zip:	Daytime Phone #			
		•	e original, if found, is invalid and must be destroyed. Print Name	ed.		
SIGNATURE OF OWNER			Print Name			
		NOTARY STAT	FEMENTappeared before me in the State of			
	County of	. 7	thisday of,			
(SEAL)	County Clerk or N	lotary Public				
		My Commi	ssion Expires:	: 		
FOR OFFICE USE ONLY Date application is received Deputy's Initials LIENS: YES NO Tyler CSA Sales Tax Hold File Hold File & Return Work NMVITS (only once)	9		NOTE: Beginning July 1, 2018, Duplicate Titles may be issued immediately from your County Clerk if: -There are no open liens -All owners of record have signed/notarized -Payment of fees is received			
Mailed to:		Date Is	ssued:Title No:			
			FC8-202	1		