

State of Nebraska State of NebraskaNEBRASKAAPPLICATION FOR DUPLICATE **CERTIFICATE OF TITLE**

DEPARTMENT OF MOTOR VEHICLES

Application May Be Presented To Any Motor Vehicle Office

1 Vehicle or Motorboat Information				F	ee \$14.00	
Vehicle Identification Number			Year	Make		
Model		Tit	le Number			
2 Owner/Applicant Information						
The applicant for certified copy of a Certificate of Title is the: Owner Lienholder TOD Beneficiary						
of said vehicle.						
Is this vehicle subject to an existing lien?	□Yes □No	Name	of lienholder:			
Last Name	First Name			Middle Initial	Check here if spouse of Owner 1.	
Last Name	First Name			Middle Initial		
Address (Street or RR and PO Box)	City		State	Zip		
Mailing Address (If other than above)	City		State	Zip)	
3 Notarization						
The undersigned being duly sworn depose or affirm and say that the information provided on this application is true and complete and that the original certificate of title has been lost, destroyed, or mutilated. Use of a false or fictitious name, knowingly making a false statement or knowingly concealing a material fact in this application can result in a fine or imprisonment or both and cancellation of your certificate of title.						
NOTE: Application is void unless signed by Applicant(s) and properly notarized.						
Signature of Applicant		Signatur	e of Applicant			
		2	11			
Subscribed and sworn before me the	day	Subscrit	ed and sworn befo	ore me the	day	
of		of				
Signature Notary Public or Designated County Official			Signature Notary Public or Designated County Official			
My commission expires on	·	My com	mission expires or	n	·	
	SEAL				SEAL	