

State of Nebraska **Application for Certificate of Title**

1 Vehicle or Motorboat Description													Fee \$10.00
	vage	Previousl	y Salvage	d	□ Flood			Non-Tr	ansfe	rable	☐ _{Mai}	nufact	urer Buyback
Vehicle Ident	ification N	Number		Yea	ar	Make				Model			
Body Style	Color		GVWR		Capacity/Pro	opulsion	1		Taxi	Use	Yes		No
2 (Owner	Applicant 1		tion	(if more th	an three	e (3), pl	ease atta	ich a se	econd a	application	1)	
If more than one owner, do you wish clear rights of survivorship to be transferred to the surviving owner(s) in the event of the death of one owner? No (probate will be required to transfer ownership - owner names separated with "And") Yes (ownership will transfer to co-owner upon presentation of death certificate - owner names separated with "Or")													
Owner name/Last or business name* First Name Middle Name													
Nebraska Driver's License Number				Soc. Sec. Number			Emp	Employer Identification Number					Date of Birth
2 nd Owner name/Last or business name First						Name				Mi	iddle Nar	ne	Check here if spouse of owner 1
Nebraska I	Driver's L	icense Number		Soc.	Sec. Number		Emp	loyer Ide	ntificat	ion Nui	mber		Date of Birth
3 rd Owner	name/L	ast or busines	s name*		First	Namo	e			Mi	iddle Nar	ne	Check here if spouse of owner 1 or 2.
Nebraska Driver's License Number				Soc. Sec. Number			Employer Identification Number				Date of Birth		
Transfer On Death Beneficiary(ies), if applicable: If indicated, upon death of last surviving owner, ownership of the vehicle will transfer to listed entity(ies). 1st TOD 2nd TOD													
Name* *(Only first 35 positions will print on title) Name*													
Owner's Residential Address, City, State, Zip													
Owner's Mailing Address, City, State, Zip													
3 I	Lien In	formation	(please atta	ch a se	cond applicati	on for s	econdar	y lien not	ations)	Fe	ee \$7.00		
Is there a lien on this vehicle? Yes No If yes, you must complete this section and provide a copy of the lien instrument with this application.													
Lien Holder Name:										_ PL	ID:		
Stree					City					State			ZIP
If there is a lien, are you a non-resident requesting a printed title for issuance of a title in your state of residence? Yes No The undersigned being duly sworn depose or affirm and say that the information provided on this application is true and complete. 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.													
Signature						Sig	gnature						
proof he/she is	s handicap		r is too you	ng to s	ign, a parent, l		vners are						owner provides sferring from an out-
of-state title w	hen owne	rship is not chang	ing, one ow	ner m	ay sign.								