

STATE OF DELAWARE
DIVISION OF MOTOR VEHICLES
P.O. BOX 698, DOVER, DE 19903
WWW.DMV.DE.GOV

APPLICATION FOR:				
	CORRECTED TITLE			
	DUPLICATE TITLE			
	WEIGHT CHANGE			

ORIGINAL CERTIFICATE OF TITLE MUST ACCOMPANY APPLICATION FOR CORRECTED TITLE. ODOMETER DISCLOSURE INFORMATION MUST BE COMPLETED.

Delaware	New	Last Expiration	
Tag Number	Number	Date of Tag Number	
I certify to the best of knowle statements is checked:	adge that the ODOMETER READING	β is the ACTUAL MILEAGE of the vehicle ι	inless <u>one</u> of the following
	• MILES (NO TENTHS) [] 1	. The mileage stated is in excess of its me	chanical limits.
		(Mileage exceeds 99,999 miles)	
	· · · · · · · · · · · · · · · · · · ·	. The odometer reading is not the actual m WARNING ODOMETER DISCREP	ANCY
		LSE STATEMENT may result in fines and/	
	ury, that the statements made herein	are true and correct to the best of my/our l	knowledge, information and
belief. Make: Year:	Body Style: Color 1:	Color 2: VIN Number:	
Registered Weight: From	·	To Fee:	
Change of VIN: From		То	
Signature of Inspector Author	orizing Change of Serial Number:		
Change of Mileage: From		Го	
Change of Name: From		Γο	
Duplicate Title: \$50.00	Corrected No Li	en: \$35.00 Corrected	With Lien: \$55.00
	LIEN OR ENCU Lienholder) –AND ADDRESS (If No		
		She, State SO	
Name (s):			
Street			
Sileei.			
City:	State:	Zip Code:	
I (we) certify, under penalty	of perjury, that the title to this vehicle	is lost or destroyed. In the event the title is	located, it shall be
returned to the Division imm	ediately.		
Х		Х	
Signature of Owner	Dr. Lic. No	Signature of Co-Owner	Dr. Lic. No
X		-	
SIGNATURE OF INDIVIDU	UAL OTHER THAN OWNER REQU	ESTING DUPLICATE.	Dr. Lic. No.
	DO NOT	FILL IN BOTH BLOCKS	
COMPLETE THIS BLOCK	ONLY IF LIEN IS SATISFIED.		
Date of Release		COMPLETE THIS BLOCK ONLY IF L ENTERED.	IEN IS TO BE RE-
		ENTERED. This is our written consent for the Moto	or Vehicle Director to issue
		ENTERED.	or Vehicle Director to issue
		ENTERED. This is our written consent for the Moto	or Vehicle Director to issue
Lienholder		ENTERED. This is our written consent for the Moto a duplicate title in the above applicant'	or Vehicle Director to issue
Lienholder		ENTERED. This is our written consent for the Moto	or Vehicle Director to issue
Lienholder Authorized Representative		ENTERED. This is our written consent for the Moto a duplicate title in the above applicant'	or Vehicle Director to issue

PROCEDURES FOR PROCESSING A DUPLICATE TITLE

- 1. MV213 must be completed. Please include the tag number and expiration date of tag.
- 2. **ALL** owners must sign the MV213 and provide their driver's license numbers. A copy of the owner's driver's license or other identification showing the owner's signature must be supplied when the title is processed in the mail by an individual other than a lienholder or dealer.
- 3. Signature of owner can be signed by a power of attorney. An original **NOTARIZED** power of attorney must accompany the MV213. Power of attorney must sign the owner's name in addition to his/her own name.
- 4. If the owner has signed this form and is appointing you to process the request on his/her behalf, you must sign your name and provide your driver's license number in the space provided.
- 5. If there is a lien, the lienholder <u>must</u> complete one of the sections at the bottom of the MV213.
- 6. A fee of **\$50.00** must accompany the Application for Duplicate Title (MV213.)
- Original certificate of title must accompany any Application for <u>Corrected Title</u> (MV213.) A fee of \$35.00 must accompany an application for a corrected title without a lien; \$55.00 with a lien.
- 8. A new lien cannot be placed on the title at the same time that the duplicate title is issued. The lien is placed as a supplementary title after the duplicate title is issued.
- 9. The odometer disclosure **MUST** be completed.
- 10. **NOTE** please send a self-addressed envelope.