



Duplicate Idaho Title Application

Idaho Transportation Department

ITD 3367 (Rev. 02-16)

Supply # 01-957105-8

This form must be notarized. Only the owner or lienholder of record or their agent may apply for a duplicate title.

- To ensure proper processing of your application, use the step-by-step instructions on page 2.
- This form cannot be used to transfer ownership to a new buyer or transferee. To transfer ownership use form ITD 3369.
- Take the completed application to any county motor vehicle office. Checks are made payable to that county; or mail the completed application to the following address with a check for the applicable fee made payable to Ada County.

Physical Address

Ada County Processing Center
9115 Chinden Blvd, Ste 103
Garden City ID 83714

Mailing Address

Ada County Processing Center
PO Box 140019
Garden City ID 83714

Be Sure to Include the Proper Fee - Do Not Send Cash

Regular Duplicate Fee - \$14.00
Title Search Fee - \$7.00*
RUSH Duplicate Fee - \$40.00

Vehicle/Vessel Information - Required

SECTION 1

Vehicle/Hull Identification Number*	Title Number*
Year	Make
	Model

***BOTH** the Vehicle/Hull Identification Number and Title Number are necessary to locate your record. Your Registration should have both numbers. If your Registration is not available, contact any county vehicle licensing office for this information. Include an additional \$7.00 title search fee if either is left blank.

Original Owner Information and Lienholder Information as Shown on Current Title - Required

SECTION 2

Owner #1 - Name Shown on Original Title	<input type="checkbox"/> Or	<input type="checkbox"/> And
	<input type="checkbox"/> LSR	<input type="checkbox"/> DBA
Owner #2 - Name Shown on Original Title	<input type="checkbox"/> Or	<input type="checkbox"/> And
	<input type="checkbox"/> LSE	<input type="checkbox"/> DBA
Owner #3 - Name Shown on Original Title		
Lienholder of Record		
City, State, Zip		

Owner Information to be Shown on Duplicate Title - Required*

SECTION 5

Owner #1 - Full Legal Name (Last, First, Middle) or Business Name	<input type="checkbox"/> Or	<input type="checkbox"/> And
	<input type="checkbox"/> LSR	<input type="checkbox"/> DBA
Idaho Driver's License Number or SSN / EIN if Business		
Owner #2 - Full Legal Name (Last, First, Middle) or Business Name	<input type="checkbox"/> Or	<input type="checkbox"/> And
	<input type="checkbox"/> LSE	<input type="checkbox"/> DBA
Idaho Driver's License Number or SSN / EIN if Business		
Owner #3 - Full Legal Name (Last, First, Middle) or Business Name		
Complete Physical Address of Owner's Current Legal Residence or Business		
Owner's Current Mailing Address (if different)		
Added Owner's Signature		
X		

*This section will be used to correct our records, add, drop and/or change a name. SSN and DL numbers will not be printed on Title. (See Page 2)

Mail Title to Different Address

SECTION 3

Complete only if the duplicate title is to be mailed to an address other than the address shown above for owner or lienholder
C/O Name
Address (Street, City, State, Zip)

To Release Lien on Original Title

SECTION 4

Lienholder of Record
Authorized Representative's Name (Print)
Authorized Representative's Signature
X
Date

To Add New Lien to Duplicate Title

SECTION 6

Lienholder's Name
Address
City, State, Zip

Owner's or Lienholder of Record's Signature With Notary - Required

SECTION 7

I hereby make application for duplicate title for the vehicle/vessel described above. The original title has been lost unless otherwise indicated. <input type="checkbox"/> Illegible <input type="checkbox"/> Mutilated (Please attach the old title if either of the above are checked). I certify under penalty of law that all statements contained in this application are true and correct. I realize that I cannot use this form to sell this vehicle/vessel. I hereby authorize the new title to be issued in the name(s) shown in Section 5. The signature below is my true and legal signature.
X
X
Daytime Phone Number (Include Area Code)

Subscribed and sworn before me this _____ day of _____ year _____

SEAL
or
STAMP

X
Notary Public's or Idaho Transportation Department Agent's Signature



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Instructions

For signatures, remember:

- If an agent signs this form for **any** applicant's signature, either the original document appointing the agent (e.g., power of attorney) or a copy verified to be a true copy of the original must be attached. The power of attorney must include a complete vehicle/vessel description and be signed by the grantor with the grantor's signature notarized.
- If two owners of record were shown on the original title, either may sign if their names were connected by "OR", but both must sign if their names were connected by "AND".
- If the lienholder of record is applying, enter the business name with an authorized party's signature and job title.
- **The applicant's signature must be either notarized or witnessed by an assessor or deputy assessor, or it will not be processed.**
- A signature from the lienholder in Section 7 **does not** release their lien.

Note	Sections 1, 2, 5, and 7 are required to be filled out completely and correctly.
Section 1	Enter the complete vehicle or hull description. Both the vehicle/hull identification number and title number must be listed. Also include model year, make, model, and description.
Section 2	List the current owner of record. If there are two owners, check the "OR" or "AND," whichever appeared on the original title, and list the second owner. If an individual is "doing business as" a company name, check DBA. List the current lienholder information and mailing address.
Section 3	If the duplicate title is to be mailed to a party other than the owner or lienholder, list the address in this section.
Section 4	This section is to be completed and signed by the lienholder of record if they wish to release their lien. A separate release attached to the duplicate application is also acceptable. If an existing lien shown on the title record has not been released, <u>the duplicate title will be issued with the lien and mailed to the lienholder.</u>
Section 5	Completing this section accurately will ensure <u>your title</u> and our records are correct. List the <u>full legal names</u> of <u>all</u> owners to be shown on the new duplicate title. Check "OR" or "AND", if there are two or more owners. If an individual is "doing business as" a company name, check "DBA". Provide Idaho Drivers License numbers or Idaho ID Card numbers, or SSN for owners 1 and 2. List the primary owner's current physical address, and mailing address if different. If "AND" is checked, any owner that did not appear on the original title must sign here. A name can only be added or removed if an owner on the original title has signed Section 7.
Section 6	Complete this section to add a new lien to the duplicate title.
Section 7	It is presumed that your title has been lost. If it has not been lost, but is illegible or mutilated, check the appropriate box and attach the title.

Mail this completed application and a check for the proper fees, as indicated below. Make check payable to Ada County, and mail to the address on page 1; **or**

You may bring this form to your local county assessor's motor vehicle office with the fees listed. Make your check out to that county.

Duplicate Idaho Title Fee - \$14.00	Include a \$14.00 duplicate Idaho title fee with this completed application.
Title Search Fee - \$7.00	If you do not have <u>both</u> the vehicle/hull identification number <u>and</u> the title number, add \$7.00 for a title record search to the \$14.00 duplicate title fee, for a total of \$21.00. (The title number and VIN/HIN can be found on your Idaho Registration.)
RUSH Fee - \$26.00	For "RUSH" service, add \$26.00 to the \$14.00 duplicate title fee for a total of \$40.00.

Failure to complete any of the above requirements will result in the application being returned.

Faxed copies are not acceptable.

If you have questions, please contact the Title Assistance Unit at (208) 334-8663, Monday through Friday from 8:30 a.m. to 5:00 p.m. Mountain time.

Thank You