NEW YORK STATE OF OPPORTUNITY. Department of Motor Vehicles

APPLICATION FOR DUPLICATE TITLE

TITLE BUREAU PO Box 2750 Albany NY 12220-0750

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If any of the statements below apply to this application, mark the below. If there is no statement that applies, go to "Instructions" b		each statement that ap	plies a	and cor	mplete Section 1 and Section 2	
The address is a NEW ADDRESS. The OWNER NAME HAS CHANGED. Enter NEW name:	Last, Fi	rst, Middle Initial				
☐ The OWNER IS DECEASED. ☐ The OWNER HAS GIVEN POWER OF ATTORNEY.						
Included with this application is an original LIEN RELEAS	SE that i	s signed and includes	a date	. (Phot	ocopies are not accepted.)	
	- 11141 1	s signed and merades	u date	. (1 1100	ocopies are not accepted.)	
INSTRUCTIONS:						
 Complete Section 1 below. Provide all requested information 	on.					
• Read, sign and enter the date in Section 2 - Certification.	• Read, sign and enter the date in Section 2 - Certification.					
• Provide the required proof of identity for the person who signs the certification in Section 2 (see Section 3 on page 2).						
 If your name has changed, the owner is deceased, or if you described in Section 4 on page 2. 	have P	ower of Attorney, prov	vide th	e requi	red documentation that is	
 Provide a separate \$20 fee for each application. 						
 Bring this application with your ORIGINAL proof of ident applies to you, bring the required documentation. OR 	tity docu	uments and the correct	t fee to	any M	Iotor Vehicles office. If Section 4	
Mail this application with PHOTOCOPIES of your proof of the correct fee to the Title Bureau at the address shown on "Commissioner of Motor Vehicles", do not mail cash.						
OR						
If your address has not changed since you last registered th duplicate title on-line. For more information visit www.dm			dress i	s on yo	our registration, you can apply for a	
■ CUSTOMER MUST COMP		E SECTIONS 1	and	d 2 E	BELOW	
SECTION 1						
	, 1				L. BLAN	
	ear Make				License Plate No.	
Owner's Name (Last, First, M.I.)					Date of Birth (Month/Day/Year)	
C/O (applies if Power of Attorney or dealer authorization is shown or the owner is	deceased)				
Current Mailing Address (Number and Street)			Apt. Nu	mher	Daytime Telephone Number	
Culterit Walling Address (Number and Street)			7 tpt. 14u	IIIDOI	()	
City		'		State	Zip Code	
SECTION 2 — CERTIFICATION						
I understand that the DUPLICATE CERTIFICATE OF TITLE th titles, and that only this duplicate title may be used to sell, tran	sfer or	trade the above vehicl	e, boat	t or ma	nufactured home. I certify that the	
Certificate of Title for the vehicle, boat or manufactured home of						
or damaged. If lost or destroyed, I do not know where it is; if da have given on this application is true to the best of my knowle						
application is a misdemeanor according to Article 210 of the Pen	_			_		
SIGN HERE •						
SION HERE 7(Signature of Owner or App	olicant)		-		(Date)	

If you sign for a corporation or use an "in care of" address, print your full name and your title here (i.e. Power of Attorney, Executor, Next of Kin, President, etc.)

SECTION 3 - PROOF OF NAME/IDENTITY

If you apply by mail, remember to mail copies of your proofs. Originals will not be returned.

For Persons

- · Proof of date of birth, and
- 6 points of proof of name

A NYS photo driver license, learner permit, or non-driver ID card that is current or that expired no more than 2 years ago will meet both requirements. Other acceptable documents for proof of identity and their related point values are listed on form ID-82 (Proofs of Identity for Registration and Title) which is available at www.dmv.ny.gov and any Motor Vehicles office.

For Corporations (show one of the following proofs)

- 1. A NYS vehicle registration or a title certificate in the name of the corporation; **or**
- 2. A certified copy of the NYS Certificate of Incorporation; or
- 3. New York State corporations must provide:
 - a. a certificate of good standing or subsisting issued by the NYS Department of State; or
 - b. a filing receipt issued by the NYS Department of State.
- 4. Out-of-state corporations must provide:
 - a. a certified copy of the Certificate of Incorporation from their home state; or
 - b. a certificate of subsisting or foreign bid issued by the NYS Department of State.
- 5. Corporate DBAs must provide a filing receipt from the NYS Department of State that includes the DBA.
- 6. Unincorporated associations: The proofs that are required depend on the type of organization. Contact a Motor Vehicles office for information.

For Partnerships (show one of the following proofs)

- A Certificate of Partnership (filed with the County Clerk); or
- A copy of the DBA filing receipt issued by the County Clerk.

SECTION 4 - SPECIAL INSTRUCTIONS FOR NAME CHANGE, OWNER DECEASED OR POWER OF ATTORNEY

Name Change

- 1. At the top of page 1 mark the box "OWNER NAME HAS CHANGED" and enter your new name in the space provided to the right.
- 2. In Section 1, enter your former name in the "Owner's Name" box and complete the remaining boxes in Section 1.
- 3. In Section 2, sign the Certification and write the date.

If your name has changed and you sell the vehicle, boat or manufactured home, you can give the title with your former name to the person who purchases the vehicle. A title in your new name is not required.

If your former name is on the title and registration and you need a duplicate title in your new name, you must first change your name on your driver license and registration. Bring this application AND original marriage certificate, divorce certificate or other documents that confirm your name change to any Motor Vehicles office.

If your former name is on the title but the vehicle is NOT registered and you need a title in your new name, you MUST mail this application AND a photocopy of your marriage certificate, divorce certificate or other documents that confirm your name change to the Title Bureau at the address shown at the top of Page 1.

Owner Deceased

At the top of page 1 mark the box "OWNER IS DECEASED". In Section 1:

- 1. Enter the name and date of birth of the deceased.
- 2. In the "C/O" (In Care Of) space, enter your name.
- 3. In the "Current Mailing Address" space, enter your address.
- 4. You must present documents to prove your identity, but not the identity of the deceased (see Section 3). You must also provide the following:

If you are the deceased's spouse, child under the age of 18 or next of kin, present a copy of the Death Certificate (Certificate of Death or Certification of Death), Letters Testamentary, or Letters of Administration. In Section 2 sign your name then write "Spouse", "Next of Kin" or for a child under the age of 18 "Guardian of minor child". If those relationships do not apply to you, present Letters Testamentary or Letters of Administration.

NOTE: Additional guidelines could apply to register or transfer the vehicle for which you need a duplicate title. For additional information, see form MV-349 (Transfer of Vehicle Registered in Name of Deceased Person) or form MV-349.1 (Affidavit for Transfer of MotorVehicle).

Power of Attorney

At the top of page 1 mark the box "OWNER HAS GIVEN POWER OF ATTORNEY". In Section 1:

- 1. Enter the name and date of birth of the owner.
- 2. In the "C/O" (In Care Of) space, enter your name.
- 3. In the "Current Mailing Address" space, enter your address.
- 4. Provide an original Power of Attorney (POA) that is <u>notarized</u> and includes: The date POA was issued, name and address of person or company that gave POA, name and address of person or company that has the POA, original signature of person who gave the POA.