JACKIE R. GONZALES
ALBANY COUNTY CLERK

525 GRAND AVE SUITE 202 · LARAMIE, WYOMING 82070
(307) 721-2541 · FAX (307) 721-2544
JGONZALES@CO.ALBANY.WY.US

DATE RECEIVED: _____
DATE TO BE ISSUED: _____
RECEIPT # ($15 FEE): _____
CHECKED HOLD FILE: _____
CHECKED FOR LIENS: _____

APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE

- I/we hereby make application for a duplicate Wyoming Certificate of Title for the following motor vehicle, trailer, watercraft, or mobile home and attach hereto the necessary fee of fifteen ($15.00) dollars.

TITLE NO.: _____
MAKE: _____
YEAR: _____
VIN/HIN: _____
BODY STYLE: _____

_____
PRINTED NAME OF OWNER

_____
PRINTED NAME OF OWNER

- To the best of my/our knowledge and belief, no liens are held against said motor vehicle, trailer, watercraft, or mobile home, other than the liens shown on the original Certificate of Title. Furthermore, I/we attest that the said Certificate of Title has been mutilated, lost, or destroyed, and is not assigned to or in the possession of any other person.

- I/we authorize the duplicate Certificate of Title be mailed to:

_____ _____
NAME DAYTIME PHONE NUMBER

_____ _____ _____ _____
MAILING ADDRESS CITY STATE ZIP

- I/we hereby swear or affirm under penalty of perjury that All information on this Application for duplicate Certificate of Title is true and correct and that I/we are lawfully applying for Wyoming duplicate Title.

_____ _____
SIGNATURE OF OWNER DATE SIGNATURE OF OWNER DATE

STATE OF _____)
) ss
COUNTY OF _____)

Subscribed and sworn to (or affirmed) before me by _____
on this _____ day of _____, 20____. Witness my hand and official seal.

_____ My Commission Expires: _____
SIGNATURE OF NOTARIAL OFFICER