For Office Use Only		
Sales Tax Paid: yes no	Lien Released: yes no	NMVTIS Run: yes no

DUPLICATE CERTIFICATE OF TITLE APPLICATION AND AFFIDAVIT

TO:	Linda Fritz Crook County Cle P.O. Box 37 Sundance, WY 82 Email: lindaf@cr	2729	ebsite: <u>www.crookcount</u>	ty.wy.gov
		for a duplicate Wyom mobile home, as descr	ing Certificate of Title faithed below:	for the
Owne	r:			
Title I	Number:	VIN:		
Make	:	Year:	_	
shown on the or destroyed possession of I autho	original certificate of { }. Furthermore, the any other person. orize the duplicate control or control of the duplicate control or c	of title. The original title title has not been assignated assignated as title be mainly assignated as title be mainly as the second as the se		mutilated { , nor is it in the
City:		State:	Zip:	
Phone	e:			
application fo Wyoming Ce	or Certificate of Title rtificate of Title.	is true and correct and	ry that all of the informat that I am lawfully applyi	ing for a
_				
State of)) ss.			
County of				
	worn to (or affirmed) (Applicant's Name Here)		day of	, 20
(Seal)	(Applicant's Name Here)			
My Commiss	ion Expires:	•	rk or Notarial Officer n Dollars (\$15.00)	