

JOHNSON COUNTY CLERK
76 N MAIN ST STE 101 BUFFALO, WY 82834
Telephone 307-684-7272 • Fax 307-684-2708

**AFFIDAVIT AND APPLICATION FOR OBTAINING
DUPLICATE CERTIFICATE OF TITLE**

To the County Clerk of Johnson County, Wyoming:

I/we hereby certify that Certificate of Title No. _____ of
Johnson County, Wyoming was issued to me/us for the motor vehicle described hereto, to wit:

Make of Car: _____ Body Style: _____ Year: _____

VIN: _____ Color: _____

In the name of _____

and to the best of my knowledge and belief, I am requesting this Duplicate Certificate of Title
for the following reason ___ mutilated; ___ lost; ___ destroyed

OR, _____ I/we have sold this vehicle and the purchaser has lost the original Certificate of
Title.

I/we swear under penalty of perjury that there are no additional liens on said motor vehicle other
than that shown on the original Certificate of Title

I hereby make application for a duplicate Certificate of Title covering said motor vehicle and
authorize the same to be delivered to:

Name: _____
Mailing Address: _____
City _____ State _____ Zip _____
Phone Number: _____

Contact Name (if other than applicant) _____
Contact's Phone Number: _____

I attach hereto the necessary fee of Fifteen Dollars (\$15.00).

Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission expires:

County Clerk or Notary Public

Date Received: _____

New Title No: _____

Date Issued: _____