COUNTY OF HAWAII
DEPARTMENT OF FINANCE
VEHICLE REGISTRATION & LICENSING DIVISION
101 PAUAHI STREET, SUITE NO. 5
HILO, HI 96720

OFFICIAL USE ONLY

Reset Form

Number - Year original issued
Application accepted and duplicate issued

Date	Clerk

APPLICATION FOR DUPLICATE
Motor Vehicle Certificate of Title

TYPEWRITE OR PRINT IN INK - Improperly filled application will not be accepted.

FEE
$5.00

License Plate Number: _____ Make: _____

Vehicle Identification Number: _____

Registered Owner of Record: _____

Lienholder of Record: _____

Address: _____
NUMBER AND STREET CITY ZIP CODE

The undersigned certifies that the Certificate of Title for the above described vehicle has been ☐ stolen ☐ lost ☐ mutilated ☐ defaced, and hereby requests the issuance of a duplicate, which issuance shall void the original certificate.

DEFACED OR MUTILATED CERTIFICATE MUST BE SURRENDERED WITH THIS APPLICATION

FOR OFFICE USE ONLY
DUPLICATE TITLE #

_____
SIGNATURE(S) OF LIENHOLDER OF RECORD
☐ DRIVERS LIC# _____ ☐ OTHER _____
EXPIRATION DATE _____ EXPIRATION DATE _____

_____
SIGNATURE(S) OF LIENHOLDER OF RECORD
☐ DRIVERS LIC# _____ ☐ OTHER _____
EXPIRATION DATE _____ EXPIRATION DATE _____

_____
SIGNATURE(S) OF LIENHOLDER OF RECORD
☐ DRIVERS LIC# _____ ☐ OTHER _____
EXPIRATION DATE _____ EXPIRATION DATE _____

IF FIRM, ALSO PRINT NAME AND TITLE OF PERSON SIGNING. IF NO LIENHOLDER AND JOINT OWNERSHIP, ALL OWNERS MUST SIGN.

EFFECTIVE 01/03/2011, TO GENERATE A DUPLICATE CERTIFICATE OF TITLE, SIGNATURES MUST BE PROPERLY NOTARIZED BELOW BY A NOTARY PUBLIC, OR VERIFIED ABOVE BY PRESENTING PROPER IDENTIFICATION FROM ALL PARTIES AT THE VEHICLE REGISTRATION & LICENSING DIVISION.

(PLACE NOTARY SEAL HERE)

The foregoing instrument was acknowledged before me

this ____ day of _____, 20 ___ by _____

_____ and, _____

and, _____
who is/are personally known to me or who has/have produced the proper identification as noted above.

_____, Notary Public

State of _____, _____ Judicial Circuit

My commission expires: _____

STATE OF HAWAII NOTARY CERTIFICATION
(PLACE NOTARY SEAL HERE)

Document Date _____ # of pages _____

Notary Name _____

_____ Judicial Circuit

Document Description: _____

_____

_____
Notary Signature Date