

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

OFFICIAL USE ONLY

Number - Year original issued _____
Application accepted and duplicate issued _____

APPLICATION FOR DUPLICATE
Motor Vehicle Certificate of Title

Date _____

Clerk _____

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

License Plate Number: _____ Make: _____
Vehicle Identification Number: _____
Registered Owner of Record: _____
Lienholder of Record: _____
Address: _____
NUMBER AND STREET CITY ZIP CODE

FEE
\$5.00

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)

STATE OF HAWAII NOTARY CERTIFICATION
(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: _____

Document Date _____ # of pages _____
Notary Name _____
Judicial Circuit _____
Document Description: _____

Notary Signature _____ Date _____