

State of Nebraska APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE

Application May Be Presented To Any Motor Vehicle Office

1 Vehicle or Motorboat Information					Fee \$14.00	
Vehicle Identification Number		Ye	ar	Make		
Model		Title Nu	mber			
2 Owner/Applicant Information						
The applicant for certified copy of a Certifi	cate of Title is the	: 🗆 Owner	🗆 Lienh	older	TOD E	eneficiary
of said vehicle.						
Is this vehicle subject to an existing lien?	□Yes □No	Name of lie	enholder:			
Last Name	First Name			Middle I	nitial	Check here if spouse of Owner 1.
						spouse of Owner 1.
Last Name	First Name			Middle I	nitial	
	Cit		Ct. t.		7.	
Address (Street or RR and PO Box)	City		State		Zip	
Mailing Address (If other than above)	City		State		Zip	
3 Notarization						
The undersigned being duly sworn depose or affirm and say that the information provided on this application is true and complete and that the original certificate of title has been lost, destroyed, or mutilated. Use of a false or fictitious name, knowingly making a false statement or knowingly concealing a material fact in this application can result in a fine or imprisonment or both and cancellation of your certificate of title.						
NOTE: Application is void unless signed by Applicant(s) and properly notarized.						
Constant of Applicant		Signature of	Annlinent			
Signature of Applicant		Signature of	Applicant			
Subscribed and sworn before me the	day	Subscribed a	nd sworn bef	ore me the _		day
of		of				
Signature Notary Public or Designated County	Signature Notary Public or Designated County Official					
My commission expires on		My commiss	ion expires of	n		·
	SEAL					SEAL