

Application for Duplicate Certificate of Title **Fee: \$20.00**

The MVA should contact me at: _____ or _____ for any questions regarding this application.
 (Email address) (Phone)

This application must be accompanied by a copy of the valid state issued identification(s) of the vehicle owner(s) and any person presenting the application.

A DUPLICATE TITLE MAY BE REQUESTED:

- Online through the MVA's website at www.mva.maryland.gov. **Duplicate titles ordered online may be mailed to an alternate address at the owner's request.** Mailing instructions are provided in the online application.
- At a KIOSK located at MVA's Full and Express Offices. **Duplicate title ordered may be mailed to an alternate address.**
- At a tag and title service licensed by the MVA. **A copy of the valid state issued identification must be submitted by the applicant along with the application.**
- At all full service MVA branch offices and mailed the next business day to the address on record with the MVA. **A copy of the owner(s) valid driver's license or state issued i.d.(s) must accompany this form. Titles may not be mailed to an alternate address.**

Reason for Request (please check one):

- Lost Destroyed Altered Mutilated Misassigned Returned to State Other _____

The altered, mutilated, or misassigned title is required when making an application for a duplicate. The out-of-state title is required if the original Maryland title was surrendered to another state.

Name of Secured Party
 (Bank, Finance Company, Etc.) _____

Address of Secured Party _____

Current Maryland Title # _____ Make of Vehicle _____ Model Year _____

Vehicle Identification Number _____

Owner's First Name _____ Middle _____ Last _____

Driver's License # _____ Date of Birth _____

Co-Owner's First Name _____ Middle _____ Last _____

Co-Owner's Driver's License # _____ Date of Birth _____

Current Resident Address _____

City _____ State _____ Zip Code _____

Please check here if this is a new address.

I/we certify, under penalty of perjury, that the statements made herein are true and correct, to the best of my/our knowledge, information, and belief.

This _____ day of _____ year _____

Owner's Signature _____ Co-Owner's Signature _____

This application requires the signature of the owner(s).

- If jointly owned, all owners signatures are required.
- If the owner is a business entity, the person legally authorized to sign must state their capacity after their signature.
- If the owner is a trust, the trustee must sign and state their capacity.

Penalty for falsifying this application for a title or registration is punishable by a fine up to \$1,000.

- The personal representative or legal heir of a deceased owner is required to submit letters of administration.
- If the vehicle is jointly owned by spouses and one is deceased, the surviving spouse is not required to include a certified copy of the death certificate if they have a "Reported Deceased" notice (Form VR-278) or a decedents letter (Form VR-264P) from the MVA.
- A bankruptcy trustee is required to attach a copy of their appointment by the court.

Important: This Section can only be used if the lien(s) are over seven (7) years old and have been satisfied.

"I hereby certify, under penalty of perjury, that the above referenced vehicle lien has been satisfied in full.

I further certify that in the event a lien or lienholder is later determined to exist, I will make full restitution to the lienholder and furnish the lien release to the Motor Vehicle Administration (MVA). I further certify that I will defend, indemnify and hold the MVA harmless against any claim from a lienholder or lien as a result of this title being issued."

Owner's Signature _____ Date _____ Co-owner's Signature _____ Date _____

For MVA use only

Supervisor approval: _____ Copy of I.D. attached

Reason for approval: _____