



LIENHOLDERS OR LEASING COMPANY INFORMATION

LIENHOLDER/LEASING COMPANY NAME

Lienholder/Leasing Co. Street Address, Including City, State, and Zip Code

CUSTOMER'S EMAIL

FIRST OWNER

SECOND OWNER

COMPLETE MAILING ADDRESS

VEHICLE VIN#

VEHICLE MAKE, MODEL, YEAR

CUSTOMER PHONE #

CHOOSE LOCATION: Lienholder is to mail this form and the title to the DMV location selected by customer

DOVER DMV: 303 Transportation Circle, Dover, DE 19901 or PO Box 698, Dover, DE 19903

DEL CITY DMV: 2101 Mid County Dr. New Castle, DE 19720

WILMINGTON DMV: 2230 Hessler Blvd New Castle, DE 19720

GEORGETOWN DMV: 23737 Dupont Blvd Georgetown, DE 19947

REASON FOR REQUEST: I am (we are) applying for the following on the above-described vehicle:

(select reason below)

Delaware title and registration (out of state vehicles require VIN verification / inspection)

__Change of name due to marriage, court order, etc. Any transfers, (i.e. adding or dropping a name),

require a signed letter of permission from the lien holder/leasing company.

Change of Delaware license plate.

- In order to obtain a Delaware title and registration for the first time, the Division must have the **original out-of-state title.**
- In order to change a name or license plate number on a Delaware title, the Division must have the **original Delaware title**
- The Division must have a **notarized power of attorney** from the lesser to the lessee to sign the title application for any vehicle **being leased.**
- Upon receipt of the above, a new Delaware title listing you as lienholder/leasing company will be issued and mailed to you.

Signature	Date
Signature	Date

INSTRUCTIONS FOR MV35

NAME AND ADDRESS OF LIENHOLDER/LEASING CO:

 Print the name and address of your lienholder/ leasing company, bank, credit union or finance company.

OWNER OF THE VEHICLE'S INFORMATION:

• Print your email, name and Delaware address, the vehicles VIN# (Serial No.), make, model, year of your vehicle and your phone number.

CHOOSE THE DMV LOCATION FOR LIENHOLDER/LEASING CO TO MAIL YOUR TITLE TO:

• Dover, Del City, Wilmington, or Georgetown

REASON FOR THE REQUEST:

• Check the appropriate block for which you are requesting your title.

SIGNATURE OF APPLICANT: Sign your name(s)

Mail or Fax the completed form to your lienholder/leasing company. Please call your lienholder/leasing company for the correct mailing address or fax number and the name of the person and/or department that the form should be mailed/faxed to.

DO NOT mail this form to the Division of Motor Vehicles.

Once the Division of Motor Vehicles receives your existing title from your lienholder/leasing company, we will contact **you by email if provided on this form or by post card.** You will be able to go to the location selected and process your transaction.

Titles will only be held for a maximum of 60 days.

For questions and inquiries on the status of your title, you may email DMVCustomerService@delaware.gov or call your local office:

Wilmington - 302-434-3200 Dover - 302-744-2500 Delaware City - 302-326-5000 Georgetown - 302-853-1000