



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	Year	Make
Model	Title Number	

2 Owner/Applicant Information

The applicant for certified copy of a Certificate of Title is the: Owner Lienholder TOD Beneficiary
 of said vehicle and the Original Certificate of Title has been: Lost Destroyed Mutilated

Is this vehicle subject to an existing lien? Yes No Name of lienholder: _____

Last Name	First Name	Middle Initial	Check here if spouse of Owner 1. <input type="checkbox"/>
Last Name	First Name	Middle Initial	
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. 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.

Signature of Applicant Subscribed and sworn before me the _____ day of _____ . Signature Notary Public or Designated County Official My commission expires on _____ . <div style="text-align: right;"><i>SEAL</i></div>	Signature of Applicant Subscribed and sworn before me the _____ day of _____ . Signature Notary Public or Designated County Official My commission expires on _____ . <div style="text-align: right;"><i>SEAL</i></div>
--	--

[Application Certificate of Title](#)