



John J. Barthelmes
Commissioner of Safety

STATE OF NEW HAMPSHIRE
DEPARTMENT OF SAFETY
DIVISION OF MOTOR VEHICLES
BUREAU OF TITLE AND ANTI-THEFT
23 Hazen Drive, Concord, NH 03305
TDD Access: Relay NH 1-800-735-2964

LICENSE #:

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Richard C. Bailey, Jr.
Director of Motor Vehicles

APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE

I hereby make application, in accordance with the New Hampshire laws for the issuance of a duplicate certificate of title to the below described vehicle. The original certificate has been (check one).

STOLEN LOST DESTROYED MUTILATED BECOME ILLEGIBLE NEVER RECEIVED

PLEASE GIVE THE CURRENT MAILING ADDRESS IN BLOCK 1.

1. OWNER'S NAME(S)(LAST, FIRST, MIDDLE)		2. DATE(S) OF BIRTH MO/DAY/YR	
STREET OR R.F.D. NO.		A.	
CITY OR TOWN		B.	
STATE		ZIP CODE	
3. LEGAL RESIDENCE IF OTHER THAN MAILING ADDRESS			
4. VEHICLE IDENTIFICATION NUMBER		5. ODOMETER-ACTUAL MILEAGE	
6. MAKE OF VEHICLE	7. MODEL NAME OR NUMBER	8. BODY TYPE	9. VEHICLE COLOR(S)
10. YR. OF MFG.	11. MODEL YR.	12. NO. OF CYLINDERS	13. GROSS WEIGHT
14. AXLES	15. PREVIOUS TITLE NO.	16. STATE	

PER APPLICATION \$25.00
MAKE CHECK PAYABLE TO:
STATE OF NH - DMV
DO NOT TYPE IN THIS SPACE

APPROVED BY _____

SUSPENDED BY _____

THIS VEHICLE IS SUBJECT TO THE FOLLOWING LIENS:

17. FIRST LIEN HOLDER'S NAME (IF NONE, TYPE NONE)		MOTOR VEHICLE USE ONLY
ADDRESS		
CITY OR TOWN	STATE ZIP CODE	
18. SECOND LIEN HOLDER'S NAME & ADDRESS		

OWNER'S SIGNATURE(S):

19. OWNER'S SIGNATURE(S) OR LIENHOLDER X	READ PENALTY BELOW BEFORE SIGNING X	20. DATE SIGNED (MO/DAY/YR)
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IF THE OWNER IS A CORPORATION, PARTNERSHIP OR OTHER ASSOCIATION, THE PERSON SIGNING ON ITEM 19 MUST CERTIFY BELOW, UNDER PENALTY OF PERJURY, THAT HE/SHE IS AUTHORIZED TO SIGN ON BEHALF OF THE OWNER.

I, _____ HEREBY CERTIFY THAT I AM AN AGENT AUTHORIZED TO SIGN THIS APPLICATION ON BEHALF
SIGNATURE

OF _____, THE OWNER NAMED IN ITEM 1

SUBSCRIBED AND SWORN TO BEFORE ME AT _____ N.H. ON THE _____ DAY OF _____ YR. _____

NOTARY PUBLIC/JUSTICE OF THE PEACE

AUTHORIZATION FOR MAILING:

I/WE HEREBY CERTIFY THAT I/WE INTEND TO TRANSFER MY/OUR INTEREST IN THE ABOVE VEHICLE TO A N.H. LICENSED DEALER (FOR N.H. DEALERS ONLY). I/WE AUTHORIZE THE DIVISION OF MOTOR VEHICLES TO FORWARD THE N.H. CERTIFICATE OF TITLE ISSUED AS A RESULT OF THIS APPLICATION TO THE DEALER NAMED BELOW (SEE REVERSE SIDE "INSTRUCTIONS" #5). THIS SECTION NOT FOR USE BY DEALERS OUTSIDE OF N.H. OR FOR PRIVATE SALES.

21. N. H. DEALER'S NAME:	ADDRESS:	DLR PLATE #:
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OWNER'S SIGNATURE(S) FOR AUTHORIZATION FOR MAILING ONLY:

22. OWNER'S SIGNATURE(S) X	READ PENALTY BELOW BEFORE SIGNING X	23. DATE SIGNED (MO/DAY/YR)
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PENALTY

A PERSON WHO, WITH FRAUDULENT INTENT, USES A FALSE OR FICTITIOUS NAME OR ADDRESS, OR MAKES A MATERIAL FALSE STATEMENT, OR FAILS TO DISCLOSE A SECURITY INTEREST, OR CONCEALS ANY OTHER MATERIAL FACT, IN AN APPLICATION FOR A CERTIFICATE OF TITLE, OR IN ANY PROOF OR STATEMENT IN WRITING IN CONNECTIONS THEREWITH, SHALL BE GUILTY OF A CLASS B FELONY IF A NATURAL PERSON, OR GUILTY OF A FELONY IF ANY OTHER PERSON, RSA 262:1,1.

IF LIENHOLDER WAS NAMED ON ORIGINAL TITLE, SEE REVERSE SIDE "INSTRUCTIONS" #4