

Type or
Print Only

Application for Replacement Certificate of Title

Type or
Print Only

MAKE	YEAR	VEHICLE IDENTIFICATION NUMBER	TITLE NUMBER
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Owner's Last Name _____ FIRST NAME(S) _____ MIDDLE NAME _____

Street, RFD _____ CITY _____ STATE _____ ZIP _____
CERTIFICATION

I/We, the registered owner or lienholder of the above described vehicle, hereby make application for a Replacement Certification of Title and certify that the original has been (Check appropriate box.)

- Lost Never received from the Department
- Mutilated, Destroyed or Illegible: Stolen;
- Never received from the lienholder;
- Other (State why replacement is applied for if none of above apply) _____

I/We understand that upon issuance of the Replacement, the original Title becomes void and that I am required to return the original Title to the State Tax Commission promptly should it be found. I also understand that the Replacement shall contain the legend "This is a Replacement Certificate and may be subject to the rights of a person under the original Certificate."

➤
**READ &
CHECK
HERE**
➤

- MADE BY OWNER**, if there was a lienholder shown in the original Title, you must include application for lien release. Replacement Certificate of Title, **NO LIENS RECORDED ON ORIGINAL TITLE** Application **must be signed** by owner or owners (if more than one).
- MADE BY LIENHOLDER** Replacement Certificate of Title, **LIEN RECORDED ON ORIGINAL TITLE** – *If lienholder directs State Tax Commission to mail title to owner, a completed application for release of lien, form 65-017, must be attached. When lienholder's application fails to include LIEN RELEASE, title will be mailed to lienholder as shown on title.*

<p>Applicant hereby directs the State Tax Commission to mail or deliver the title herein applied for as shown below</p> <p>COMPLETE THIS SECTION, PRINTING OR TYPING ALL INFORMATION</p> <p>IF NAME ENTERED HERE IS OTHER THAN TITLE OWNER. ATTACH APPROPRIATE POWER OF ATTORNEY. DEALERS ATTACH COPY 3 OF FORM 65-099. OTHERS USE 65-016 NOTARIZED.</p> <table border="1" style="width: 100%;"> <tr> <td style="height: 40px; text-align: center;">(TYPE OR PRINT NAME)</td> </tr> <tr> <td style="height: 40px; text-align: center;">(TYPE OR PRINT STREET ADDRESS)</td> </tr> <tr> <td style="text-align: center;">CITY (TYPE OR PRINT) STATE ZIP</td> </tr> </table>	(TYPE OR PRINT NAME)	(TYPE OR PRINT STREET ADDRESS)	CITY (TYPE OR PRINT) STATE ZIP	<p>I, the undersigned hereby certify that I am the recorded owner or lienholder of the above described vehicle.</p> <p>Owner's Signature _____</p> <p>Joint Owner's Signature _____</p> <p>Lienholder's Name _____</p> <p>Agent _____ (Signature of Lienholder Authorized Representative)</p> <p>Date _____ MONTH _____ DAY _____ 20 _____ YEAR _____</p>
(TYPE OR PRINT NAME)				
(TYPE OR PRINT STREET ADDRESS)				
CITY (TYPE OR PRINT) STATE ZIP				

Fee for Replacement Title is payable by Cashier's Check, Certified Check or other form of Certified funds. DO NOT SEND CASH THROUGH THE MAIL.

FEE OF \$4.00

TO: STATE TAX COMMISSION
TITLE DIVISION, P.O. BOX 1383 JACKSON, MS 39215

**SEE INSTRUCTIONS ON
PAGE TWO (2) OF FORM**

Instructions and Tips On Replacement Title Request

1. Only apply for a replacement title if you are certain there was a previous Mississippi title.
2. Application for replacement title (78-006) requires a fee of \$4.00
3. If the replacement title is to be mailed to anyone other than the owner, you must submit a power of attorney, executed by the owner, authorizing us to do so, and the person holding power of attorney must sign application and indicate "P.O.A." **Licensed dealers must use the Secure Power of Attorney form 65-099 (79-006).**
4. If applying for a replacement title in person, a valid photo I.D. will be required.
5. If the current title was issued in joint ownership with the names joined by "and" both signatures are required on the replacement application.
6. If we still show a lien on the computer the replacement title can only be mailed or given to the lienholder, unless you have a lien release completed and signed by the lienholder.
7. Once a replacement title is issued, the original title becomes VOID. If the original title is later found it should be surrendered to the Tax Commission.

Complete all information on reverse side of this form and mail to:

**Mississippi State Tax Commission
Title Division
P. O. Box 1383
Jackson, MS 39215**

If you need a copy of this form for your records you may make a photocopy, this original application will not be returned to you.