

UP TRACE

ENTER

STATE OF MISSISSIPPI DEPARTMENT OF REVENUE TITLE BUREAU

APPLICATION FOR OUT-OF-STATE LIENHOLDER TO ADD LIEN ON AN EXISTING MISSISSIPPI CERTIFICATE OF TITLE

For Title Bureau Use Only									

MISSISSIPP TITLE NO.	Pl						
	9 DIGITS - EXAMPLE	: 1234567-01					
YEAR	MAKE		MODEL/SERIES		VEHICLE IDENTIFICATION NO. (VIN)		
OWNER(S) LAST NAME , FIRST, INITIAL (&: &/OR; OR) FIRST, INITIAL				STREET / APT. / P.O. BOX/			
CITY		STATE	ZIP CODE				
1ST LIENHOLDER	NAME			STREET ADDRESS			
CITY STATE ZIP CODE			ZIP CODE	LIENHOLDER NUMBER (Contact Lienholder & get this) DATE OF LIEN MO. DAY YR.			
2ND LIENHOLDER NAME				STREET ADDRESS			
CITY		STATE	ZIP CODE	LIENHOLDER NUMBER (Contact Lier	nholder & get this)	DATE OF LIEN MO. DAY	/R.
						MO. DAY	rk.
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			*** DISCLOSURE STATEMENT A				
THE INFORM	IATION PURSUANT TO 42 U.S.C. §	405(c)(2)(C) A	W AND WILL BE USED IN THE ADMIN AND MISS. CODE ANN. § 63-21-15. TI' RESULT IN THE DENIAL OF A CERTIF	ISTRATION OF STATE MOTOR VEHIO TLES AND REGISTRATION RECORDS ICATE OF TITLE	CLE LAWS. THE COMMISSION S MAY BE RELEASED ONLY P	I IS AUTHORIZED TO COLLECT URSUANT TO 18 U.S.C. § §	
			A THE SELMIE ST A VERTIL				
OWNER'S SIGN		N INK BY OWNE	ER OR AUTHORIZED REPRESENTATIVE)	DRIVER'S LICENSE NUMBER			

PREPARE APPLICATION USING TYPEWRITER OR COMPUTER PRINTER ONLY

Instructions to Lienholder:

- 1.) This form can only be used by out-of-state lienholders with no business location in Mississippi. Lienholders with a Mississippi business location MUST perfect their lien on an existing MS title through a MS designated agent.
- 2.) The current Mississippi title must be submitted with this application.
- 3.) Owner's name and address entered on this application MUST match MS title. If there is a change in ownership or address, the owner must contact their local tax collector's office prior to your lien being added.
- 4.) The properly completed title application, MS title, and \$10.00 fee should be mailed to:

Title Bureau - OOS Liens P O Box 1033 Jackson, MS 39215-1033