

STATE OF COLORADO APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE

Title Number	Make	Body Style	<div style="background-color: #cccccc; padding: 2px; font-weight: bold;">THIS STATEMENT MUST BE SIGNED BY OWNER, LIENHOLDER OR AGENT.</div> <p>I affirm under penalty of perjury in the second degree, that the title for this vehicle:</p> <ul style="list-style-type: none"> Has been lost or destroyed. Has not been assigned or transferred. Is subject only to lien(s) shown on state motor vehicle records. <p>I am applying as:</p> <p><input type="checkbox"/> Owner</p> <p><input type="checkbox"/> Lienholder</p> <p><input type="checkbox"/> Agent by Power of Attorney</p> <p>And I understand that:</p> <ul style="list-style-type: none"> This duplicate title will be the only valid certificate of title. The original and any previously issued duplicate title(s) will be void.
Vehicle Identification Number		Year of Vehicle	
Name			
Address			
City	State	ZIP	
MAIL TITLE TO ANOTHER ADDRESS			
Name			
Address			
City	State	ZIP	
LIENHOLDER			
Name			
Address			
City	State	ZIP	
Signature of Owner, Lienholder, or Agent X		Date:	