



Delaware Nation Tax Commission

P.O. Box 825
Anadarko, OK 73005
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Jaycee Jared, Tax Administrator
Victoria De La Rosa-Feliciano, Vice President

Debbie Dotson, President

Application for Duplicate Certificate of Title

Vehicle Identification Number: _____

Year _____ Make _____ Model _____

Title Number _____ Tag Number _____

Decal Number _____ Expiration Date _____

Owner's Name _____

Mailing Address _____ City _____

State _____ Zip _____

Reason for this Duplicate Title _____

I, the undersigned lawful owner of the above described vehicle, hereby make application for a duplicate Certificate of Title with full knowledge that any false statement may be subject to prosecution.

There will be a fee of \$10.00 for a duplicate title.

Driver License No. _____

Signature _____

* This form **MUST** be notarized. *

Notary Public: _____

Subscribed before me this _____ day of _____ 20____.

Commission Expires: _____ Commission No.: _____

DNTC-AP-001