



STATE OF DELAWARE
DIVISION OF MOTOR VEHICLES
 P.O. BOX 698, DOVER, DE 19903
 WWW.DMV.DE.GOV

APPLICATION FOR:
 CORRECTED TITLE
 DUPLICATE TITLE
 WEIGHT CHANGE

**ORIGINAL CERTIFICATE OF TITLE MUST ACCOMPANY APPLICATION FOR CORRECTED TITLE.
 ODOMETER DISCLOSURE INFORMATION MUST BE COMPLETED.**

Delaware _____ **New** _____ **Last Expiration**
Tag Number _____ **Number** _____ **Date of Tag Number** _____

I certify to the best of knowledge that the **ODOMETER READING** is the **ACTUAL MILEAGE** of the vehicle unless **one** of the following statements is checked:

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|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------|--|--|--|--|--|-----------------------------------------------------------------------------------------------------------|
| ODOMETER READING ----- MILES (NO TENTHS) | [] 1. The mileage stated is in excess of its mechanical limits. (Mileage exceeds 99,999 miles) | | | | | | |
| <table border="1" style="width: 100%; height: 20px;"> <tr> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> <td style="width: 15%;"></td> </tr> </table> | | | | | | | [] 2. The odometer reading is not the actual mileage. ----- WARNING ----- ODOMETER DISCREPANCY |
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Failure to complete ODOMETER STATEMENT or providing a FALSE STATEMENT may result in fines and/or imprisonment. I/We certify, under penalty of perjury, that the statements made herein are true and correct to the best of my/our knowledge, information and belief.

Make: _____ Year: _____ Body Style: _____ Color 1: _____ Color 2: _____ VIN Number: _____

Registered Weight: From _____ To _____ Fee: _____

Change of VIN: From _____ To _____

Signature of Inspector Authorizing Change of Serial Number: _____

Change of Mileage: From _____ To _____

Change of Name: From _____ To _____

Duplicate Title: \$50.00 **Corrected No Lien: \$35.00** **Corrected With Lien: \$55.00**
LIEN OR ENCUMBRANCES

SECURED PARTY NAME (Lienholder) –AND ADDRESS (If None, State So)

Name (s): _____

Street: _____

City: _____ State: _____ Zip Code: _____

I (we) certify, under penalty of perjury, that the title to this vehicle is lost or destroyed. In the event the title is located, it shall be returned to the Division immediately.

X _____ Dr. Lic. No _____ X _____ Dr. Lic. No _____
 Signature of Owner Signature of Co-Owner

X _____ Dr. Lic. No _____
 SIGNATURE OF INDIVIDUAL OTHER THAN OWNER REQUESTING DUPLICATE.

DO NOT FILL IN BOTH BLOCKS

| | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>COMPLETE THIS BLOCK ONLY IF LIEN IS SATISFIED.</p> <hr/> <p>Date of Release</p> <hr/> <p>Lienholder</p> <hr/> <p>Authorized Representative</p> | <p>COMPLETE THIS BLOCK ONLY IF LIEN IS TO BE RE-ENTERED.</p> <p>This is our written consent for the Motor Vehicle Director to issue a duplicate title in the above applicant's name.</p> <hr/> <p>Lienholder</p> <hr/> <p>Signature _____ Position _____</p> |
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PROCEDURES FOR PROCESSING A DUPLICATE TITLE

1. MV213 must be completed. Please include the tag number and expiration date of tag.
2. **ALL** owners must sign the MV213 and provide their driver's license numbers. A copy of the owner's driver's license or other identification showing the owner's signature must be supplied when the title is processed in the mail by an individual other than a lienholder or dealer.
3. Signature of owner can be signed by a power of attorney. An original **NOTARIZED** power of attorney must accompany the MV213. Power of attorney must sign the owner's name in addition to his/her own name.
4. If the owner has signed this form and is appointing you to process the request on his/her behalf, you must sign your name and provide your driver's license number in the space provided.
5. If there is a lien, the lienholder **must** complete one of the sections at the bottom of the MV213.
6. A fee of **\$50.00** must accompany the Application for Duplicate Title (MV213.)
7. Original certificate of title must accompany any Application for **Corrected Title** (MV213.) A fee of **\$35.00** must accompany an application for a corrected title without a lien; **\$55.00** with a lien.
8. A new lien cannot be placed on the title at the same time that the duplicate title is issued. The lien is placed as a supplementary title after the duplicate title is issued.
9. The odometer disclosure **MUST** be completed.
10. **NOTE** – please send a self-addressed envelope.