



ALABAMA DEPARTMENT OF REVENUE
MOTOR VEHICLE DIVISION – TITLE SECTION

P. O. Box 327699 • Montgomery, AL 36132-7699

Application For Replacement Title

TYPE OR PRINT
ONLY

VEHICLE MUST BE CURRENTLY TITLED IN THE STATE OF ALABAMA
FOR 1975 OR NEWER YEAR MODEL VEHICLES

TITLE NUMBER DEPARTMENT USE ONLY

NOTE: If Lienholder Appeared On Missing Title, The Lienholder Must Complete This Application.

INSTRUCTIONS FOR COMPLETING THIS FORM APPEAR ON BACK

Submit \$15.00 Application Fee (non-refundable)
in certified funds payable to
Alabama Department of Revenue.
Do not send personal checks or cash.

| | | | | | | | | | | |
|----------------------|-------------------------------|-----|------|------|----------------------------|-----------------|-------|------------------|---------------------|----------------------------|
| A VEHICLE INFO | VEHICLE IDENTIFICATION NUMBER | | | | TRANS CODE 02 | YEAR MODEL | MAKE | MODEL | BODY TYPE | PREVIOUS ALABAMA TITLE NO. |
| | CYLS | NEW | USED | DEMO | DATE OF PURCHASE | NUMBER LIENS | COLOR | ODOMETER READING | DEPARTMENT USE ONLY | |

OWNER(S) NAME MUST BE IDENTICAL AS APPEARED ON ORIGINAL TITLE

| | | | |
|--------------------|------------------------------------|----------------------------------|---------------------|
| B OWNER INFO | NAME(S) (Last Name, First, Middle) | FELONY OFFENSE FOR FALSE ADDRESS | DEPARTMENT USE ONLY |
| | CURRENT MAILING ADDRESS | | |
| | CITY | STATE ZIP | |

NEW LIENS CANNOT BE RECORDED ON REPLACEMENT TITLES

| | | |
|---------------------|--|-----------|
| C FIRST LIEN | (DO NOT ENTER IF LIEN RELEASED) | |
| | NAME | LIEN DATE |
| D SECOND LIEN | ADDRESS | |
| | CITY | STATE ZIP |
| | FELONY OFFENSE FOR FAILURE TO NAME LIENHOLDER WITH INTENT TO DEFRAUD | |

SPECIAL MAILING (IF NO LIENS LISTED HEREON):

| | | |
|--|--|------------|
| OWNER(S) AUTHORIZATION FOR SPECIAL MAILING | OWNER(S) MUST COMPLETE SECTION I IN ORDER TO HAVE TITLE SPECIAL MAILED | LOCATOR # |
| I (WE) HEREBY AUTHORIZE MY (OUR) CERTIFICATE OF TITLE TO BE MAILED TO (IF NO LIENS LISTED HEREON): | | REJECT TO: |
| NAME | | REASONS: |
| ADDRESS | | EXAMINER # |
| CITY | STATE ZIP | ENCL: |

APPLICATION FOR REPLACEMENT OF Alabama Title: Number _____ (IF KNOWN) Which was:
(Mark ONE) Lost Stolen Mutilated Illegible or Other (reason) _____
Mutilated, illegible, or altered title must be submitted with this application.

F CERTIFICATION STATEMENT
I understand that upon issuance of the "Replacement" certificate of title, the outstanding certificate of title is "Revoked" and, if found, shall be returned to the Alabama Department of Revenue immediately. AS REQUIRED BY LAW, I further understand that the "Replacement" certificate will contain the legend, "THIS IS A REPLACEMENT CERTIFICATE OF TITLE AND MAY BE SUBJECT TO THE RIGHTS OF A PERSON UNDER THE ORIGINAL CERTIFICATE OF TITLE."
I certify that the above information is true and correct to the best of my knowledge and belief and I am aware that a false statement made on this application, with intent to defraud, is a felony violation under the Alabama Uniform Certificate of Title and Antitheft Law (Title Law) (Sec. 32-8).

| | |
|---|---|
| G Application by Recorded Lienholder | I Application by Titled Owner if No Lienholder Was Recorded on Alabama Title |
| NAME OF LIENHOLDER — MUST BE TYPED OR PRINTED | SIGNATURE OF OWNER |
| SIGNATURE OF AUTHORIZED REPRESENTATIVE | DATE |
| DATE | SIGNATURE OF CO-OWNER |
| | DATE |

| | |
|--|------------------------------------|
| H Release of Lien | J DESIGNATED AGENT USE ONLY |
| The lien recorded on the original certificate of title is hereby released. I understand that by completing Section G and this release of lien (Section H), this firm WILL NOT appear on the Replacement title as LIENHOLDER. | D.A. NAME |
| SIGNATURE OF AUTHORIZED REPRESENTATIVE | DATE |
| DATE | D.A. NUMBER |
| | REMITTANCE ADVICE NUMBER |

Submit \$15.00 Application Fee (non-refundable) in certified funds payable to Alabama Department of Revenue. Do not send personal checks or cash.

Instructions

The correct title application fee (\$15.00) must be submitted in certified funds (cashiers check or money order) payable to the Alabama Department of Revenue. **No personal checks or cash.** Please verify that there is a current Alabama certificate of title in the name of the owner(s) listed on the front of this application, prior to submitting this application. Fees are not refundable or transferrable.

Section A – Vehicle Information – Enter the vehicle identification number that appears on the vehicle in the designated block. Enter the year model (must be 4 digits), make, model, and body type. Enter the title number that is being replaced (if known) in block designated for previous Alabama title number. Enter the number of cylinders, classification (N-U-D), date of purchase, number of liens, color, and odometer reading.

Section B – Owner Information – Enter the owner(s) name(s) exactly as it appeared on the original Alabama title that is being replaced. Enter the owner(s) current mailing address.

Section C – First Lienholder Information – Enter the name, lien date, and address of recorded lienholder. **Do not enter lienholder information if lien has been released.** Note: new liens cannot be recorded on a replacement title.

Section D – Second Lienholder Information – Enter the name, lien date, and address of recorded lienholder. **Do not enter lienholder information if lien has been released.**

Section E – Special Mailing – Enter the name and address where the replacement title is to be mailed. Note: if the replacement title is to be mailed to someone other than the owner, the owner or his/her authorized representative must complete Section I in its entirety. Alabama law requires that replacement titles with lienholder(s) be mailed to the first lienholder. No special mailing is allowed.

Section F – Reason for Replacement Title – Mark the appropriate block to disclose the reason a replacement title is required. If the reason for the replacement title is other than lost or stolen, the title must be submitted with the MVT 12-1 form. Note: a replacement title cannot be used to avoid obtaining title in the name of someone who had possession of the vehicle (skipping title) and was required to obtain title in their name. Using this form to skip title can be a criminal act under the Uniform Certificate of Title and Antitheft Act and can result in the revocation of a certificate of title.

Section G – Application by Recorded Lienholder – The lienholder requesting the replacement title must complete Section G in its entirety. If the lienholder has released their lien on the vehicle, Section H must also be completed in its entirety. **Recorded liens, if not released, will be reflected on replacement certificate of title.**

Section H – Lien Release by Recorded Lienholder – The lienholder can release their lien by completing Section H. Note: if Section H is completed the lienholder must complete Section G and leave Section C blank. **Do not complete Section H if lien has not been released or if vehicle has been repossessed.**

Section I – Application by Titled Owner – The owner(s) of the vehicle or owner's authorized representative must complete Section I unless the replacement title is being sent to the recorded lienholder. If someone other than the owner completes Section I, a notarized power of attorney must accompany the application.

Section J – Designated Agent Use – If a Designated Agent of the Department of Revenue submits form MVT 12-1, its authorized representative must complete Section J and list the application on a remittance advice (form MVT 31-1). Non-designated Agents must leave this area blank.

| DEPARTMENT CORRECTION | |
|-----------------------|--------------|
| Please Check | |
| TC | MAKE |
| YR. MODEL | MODEL |
| BT | PAT |
| CYL. | N-U-D |
| DATE OF PUR | # LIENS |
| ODOMETER | LIEN DATE |
| OTHER: | RES. ADDRESS |

FOR DEPARTMENT USE ONLY
ABOVE INFORMATION APPLIES ONLY TO
VEHICLE IDENTIFIED ON FACE OF APPLICATION