### REPLACEMENT TITLE APPLICATION

MV2119 11/2017 Pursuant to s.342.13 Wis. Stat. Wisconsin Department of Transportation

# Instructions – How To Complete This Application

IF QUESTIONS: Call (608) 264-7447 or contact the DMV Customer Service Center nearest you.

For a list of title and registration locations, visit http://wisconsindmv.gov/Pages/online-srvcs/external/dmv.aspx.

To replace a lost or damaged Wisconsin title, complete Sections A though F as they apply.

If you are the lien holder who received the original title for this vehicle, please complete the Vehicle Lien Holder Certification section.

#### **SECTION**

#### **A Vehicle Owner Information**

**Owner/Co-owner:** The names on the replacement title will match what is currently in our records. "And" means all owners must sign the title to transfer ownership. "Or" means only one owner must sign the title.

**Opt Out:** You may remove your name(s) from mailing lists that contain 10 or more individual names by checking the box. Businesses are not eligible for opt out.

Social Security Number and Driver License Number: If you are applying as an individual, you are required to provide your Social Security Number (SSN), under s.342.06(1)(eg) Wis. Stats. If you have a WI driver license, you may provide that number instead of your SSN. Under the Social Security Act, 42 USCs. 405,(c) (2)(C) (i), the department and other state and federal agencies may use the SSN for purposes authorized by law. FEIN: Federal Employer Identification Number is required for corporations or other non-individual owners.

### **B** Vehicle Information

The vehicle identification number and plate number are necessary to process your application.

**C** Loan Information: For any new loans you may be adding, contact the lender for the correct information, including complete mailing address. You will receive a Confirmation of Ownership and your title will be sent to the first lender on the title.

If you are listed on the Department of Children and Family Services (DCF) docket for unpaid child support, the title will be delivered to their office (if there are no other liens on the vehicle) and you will receive a Confirmation of Ownership. If you have questions about child support, contact DCF at: (608) 267-3905.

### **D** Fees

**Replacement Title Fee** is required to replace a lost, stolen or mutilated Wisconsin title.

**Loan Filing Fee** is required if you are adding a new loan to the vehicle at the time of application for a replacement title.

**Counter Service Fee** is required if you apply in person at a DMV Customer Service Center.

**Processing Fee** may be required if you are adding a loan and the Secured Party is not filing electronically; add \$5 for DMV processing. Nonexempt Secured Parties must pay an additional \$20 surcharge that may not be charged to the customer.

## **▼** Vehicle OWNER Certification

Only the owner may apply for a replacement title if there are no liens on the vehicle or the lien was filed before July 30, 2012. Complete the permission to mail title certification section if the replacement title should be sent to someone other than the vehicle owner name and address shown above in section A.

#### **■ Vehicle LIEN HOLDER Certification**

Only the lien holder may apply for the replacement title **if the lien was filed on or after July 30, 2012**. Lien holders who received an electronic title cannot apply for a replacement using this form. They must contact their service provider for assistance. Complete the name and address section if the replacement title should be sent to someone other than the lien holder.

Release of Non-Exempt Information: Under Wisconsin open records law, the Wisconsin Department of Transportation must provide information from its records to requesters. If you do not want your name and address included in requests we receive for ten or more records, you may ask the department to withhold your name and address from those lists. Form MV3592 is available at DMV Customer Service Centers and at: <a href="http://wisconsindot.gov/Pages/global-footer/formdocs/default.aspx">http://wisconsindot.gov/Pages/global-footer/formdocs/default.aspx</a>.

**ADA:** The Wisconsin Department of Transportation complies with the Americans with Disabilities Act.

## Information Regarding Title to Lien Holder

On July 30, 2012, Wisconsin became a title to lien holder (lender) state. Any title with a lien (loan) listed as of July 30, 2012, will be sent to the lien holder rather than the owner. Owners of vehicles will receive a Confirmation of Ownership and will receive the actual title when all liens are paid off. **Vehicle owners are not eligible to apply for a replacement title until that time.** Contact your lender for the title.

- Customers may apply for a replacement title for vehicles that are currently titled in their name. This excludes any vehicles titled after July 30, 2012, with a lien listed. Titles with liens issued after this date will only be issued to lien holders. To check for lien information on your vehicle, refer to online services at: wisconsindmv.gov.
- Lien holders who received an electronic title cannot apply for a replacement using the MV2119, they must contact their service provider for assistance.

#### REPLACEMENT TITLE APPLICATION

Wisconsin Department of Transportation MV2119 11/2017 s.342.13 Wis. Stat

Processor ID No

Received - Date - Opened



New License Plate No.

Amount Received - Document No.

Check Cash



DO NOT WRITE ABOVE THIS LINE. Complete form using BLUE or BLACK INK. Use this form if you are replacing a lost, stolen, or mutilated title. See the instructions for more information. If this is a Transfer of Ownership, please use form MV1 – Title/License Plate Application. **Section A – Vehicle Owner Information** Owner Legal Name (Last, First, Middle Initial OR Business Name) Opt Out regarding open records laws (see instructions) Birth Date Owner Social Security Number - Required Driver License Number - Required FEIN Number (if company owned) - Required OR **OR** Co-Owner Name (if any) (Last, First, Middle Initial) Birth Date Co-Owner Social Security # or Driver License # or FEIN Number - Required (check one) OR AND Street Address (include PO Box if applicable) City State ZIP Code Owner Daytime (Area Code) Telephone Number **Section B – Vehicle Information** Type (Car, Truck, Van, etc.) Fleet No. (Optional) Vehicle Identification Number (standard VIN has 17 characters) Make License Plate Number Village Vehicle is kept in County City Town (check one) OF: Use this section if you are adding a new lien **Section C – Loan Information** Name of Lending Agency(s) or Person(s) Secured Party Number(s) (Area Code) Telephone Number Street Address (include PO Box if applicable) ZIP Code City State Section D – Fees MAIL the application and check to: Replacement Title Fee - \$20 WI Dept. of Transportation Loan Filing Fee - \$10......(pay fee for each loan in Section C)....\$\_ PO Box 7949, Madison WI 53707-7949 Make Check Payable To: Registration Fee Trust Counter Service Fee - \$5 (if you apply in person at WisDOT).....\$ Any title with a lien (loan) listed as of July 30, 2012, will be sent to the lien Processing Fee - (if applying thru an agent that files electronically holder. Please visit http://wisconsindot.gov/Pages/online-srvcs/otheran additional fee will be charged)...............\$ servs/lien-search.aspx to verify lien list dates. **ENTER FEE TOTAL...** Section F - Vehicle LIEN HOLDER Certification Section E - Vehicle OWNER Certification Wisconsin titles issued electronically to the lien holder cannot be By signing below, I (we) certify that my (our) title is lost, stolen or issued a paper replacement title. See reverse side for more information. mutilated and is not currently held by the lien holder. The information By signing below, we certify that we are requesting the title on and statements on this application are true and correct. our behalf as the current holder of this title and statements on Permission to Mail Title Certification this application are true and correct. If you would like the title mailed to a different address, please fill in Name of Lending Agency(s) or Person(s) the name and address below. I, the owner of the above vehicle, give permission to mail the replacement title to the following: Street Address (include PO Box if applicable) Name of Title Recipient ZIP Code City State Address of Title Recipient Secured Party Number (Area Code) Telephone Number City State ZIP Code If you would like the title sent to a different address, please fill in the name and address below. We, the lien holder of the above vehicle, give permission to mail the replacement title to the following: Name (Owner Signature) (Date - m/d/yyyy) Address City ZIP Code (Date - m/d/yyyy) State (Co-owner Signature)

**Did you...** Enclose a signed check? Sign the application? Make a copy for your records?