



Iowa Tribe of Oklahoma

R.R. 1, Box 721
Perkins, Oklahoma 74059
(405) 547-2402
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MOTOR VEHICLE LOST CERTIFICATE OF TITLE AFFIDAVIT

Registered Owner(s): _____

Address: _____

Tag # _____ Year _____ Make _____ Model _____

Reason for requiring duplicate title: _____

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

Signature of Owner: _____

State of Oklahoma, County of _____, SS:

Subscribed and sworn to before me this _____ day of _____, 20____.

My Commission Expires: _____

Notary Public: _____