



APPLICATION FOR REPLACEMENT OF IOWA CERTIFICATE OF TITLE TO A MOTOR VEHICLE (To be presented to treasurer of county where original was issued)

To the Treasurer of _____ County

The undersigned _____ Owner Holder of Security Interest

Address of above _____ Street City State ZIP Code

Title issued to _____ Name of Owner

Address of Owner as shown on Title _____

Cert. of Title No. _____ License Plate No. _____

Year _____ Make _____ Model _____ VIN _____ Vehicle Identification Number

states that said Certificate of Title has been lost, destroyed, or altered and that said vehicle has not been disposed of or encumbered except as hereinafter set forth, and hereby makes application for a certified replacement copy of such Certificate of Title. The following is a complete statement of all security interests noted upon such lost or destroyed Certificate of Title.

Table with 2 columns: Held By, Address. Rows for 1st, 2nd, and 3rd Security Interest.

Mailing Instruction if title to be sent to other than the above address, or to the holder of the security interest.

Name _____ Street _____ City _____ State ZIP Code _____

Is hereby entitled to receive the replacement certificate of title executed this _____ day of _____ by the undersigned applicant. Year _____

Pursuant to Iowa Code section 321.42, the Department or county treasurer is not authorized to refund fees collected for a replacement title.

Signature of Owner _____ OR Security Interest Holder _____

or Owners _____ By _____ Must be Signed above if Security Interest Noted

REPLACEMENT TITLE FEE: \$25.00

A replacement copy of the Certificate of Title referred to in the hereon application was issued this _____ day of _____, _____ and mailed to _____ Year _____

Replacement Copy No. _____ By _____