

MV-38 O (8-08)

PA Department of Transportation  
Bureau of Motor Vehicles  
Harrisburg, PA 17104-2516

**APPLICATION FOR  
DUPLICATE  
CERTIFICATE  
OF TITLE BY  
OWNER**

▲ For Department Use Only ▲

See Instructions on Reverse

**FEE: \$22.50**

**VEHICLE INFORMATION**

Title Number		Vehicle Identification Number			
Last Name (or Full Business Name)		First Name	Middle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth
Co-Owner Last Name		First Name	Middle Name	PA DL/Photo ID#	Date of Birth
CHECK BLOCK IF ADDRESS IS TO BE CHANGED <input type="checkbox"/>		Street Address			
<b>NOTE: Complete only if different from address listed on original title.</b>		City		State	Zip Code

**REASON FOR DUPLICATE TITLE**

APPROPRIATE BLOCK MUST BE CHECKED   Lost/Destroyed  Stolen  Defaced (Defaced title must be attached)  Never Received (Provide your correct address above)

**VEHICLE OWNER'S NOTARIZATION**

SUBSCRIBED AND SWORN TO BEFORE ME: MO. DAY YEAR		I/We state that I/we have read and signed this application after its completion, and I/we swear or affirm that the statements made herein are true and correct, and that any statement made on or pursuant to this application is subject to the penalties of 18 PA C.S. Section 4903(a)(2) (relating to false swearing), which shall include punishment of a fine not exceeding \$5,000, or to a term of imprisonment of not more than two years, or both.	
SIGNATURE OF PERSON ADMINISTERING OATH		Signature of Owner or Authorized Person	
<b>S T A M P</b>	<b>DO NOT NOTARIZE UNLESS SIGNED BY APPLICANT IN PRESENCE OF NOTARY</b>	Signature of Co-Owner or Title of Authorized Signer	
		Telephone Number (Will only be used if there is a problem with your application.) ( )	

**NOTE: COMPLETE THE INFORMATION LISTED BELOW ONLY IF A LIEN WAS RECORDED AGAINST THE VEHICLE AND THE LIEN HAS BEEN SATISFIED AND THE TITLE IS NOT ATTACHED.**

**SATISFACTION OF LIEN AND LIENHOLDER NOTARIZATION**

Date of Satisfaction	Name of Lienholder (as listed on the title)	ELT Participant? <input type="checkbox"/> Yes <input type="checkbox"/> No	Financial Institution Number
SUBSCRIBED AND SWORN TO BEFORE ME: MO. DAY YEAR		I state that I have read and signed this application after its completion, and I swear or affirm that the statements made herein are true and correct, and that any statement made on or pursuant to this application is subject to the penalties of 18 PA C.S. Section 4903(a)(2) (relating to false swearing), which shall include punishment of a fine not exceeding \$5,000, or to a term of imprisonment of not more than two years, or both.	
SIGNATURE OF PERSON ADMINISTERING OATH		Signature of Lienholder	
<b>S T A M P</b>	<b>DO NOT NOTARIZE UNLESS SIGNED BY LIENHOLDER IN PRESENCE OF NOTARY</b>	Telephone Number ( )	
		Title of Authorized Signer	
		<b>Messenger No.</b>	