

**AFFIDAVIT AND APPLICATION FOR  
OBTAINING A DUPLICATE CERTIFICATE OF TITLE  
Park County Clerk  
1002 Sheridan Ave Cody, WY 82414**

**INSTRUCTIONS**

- Download and complete this application for duplicate title.
- All Owners must sign the application in the presence of a Notary Public.
- Mail the completed application along with a \$15.00 fee to:  
Park County Clerk, 1002 Sheridan Avenue, Cody, WY 82414.

I hereby certify that Certificate of Title No. \_\_\_\_\_ of Park County, Wyoming, was issued to me for the motor vehicle briefly described below and that to the best of my knowledge and belief the said Certificate of Title has been mutilated, lost or destroyed, and that it is not assigned to, or in the possession of any other person, and there are no additional liens on said motor vehicle other than shown on the original Certificate of Title.

Make of Motor Vehicle: \_\_\_\_\_ Type: \_\_\_\_\_ Year: \_\_\_\_\_

Name of Owner(s): \_\_\_\_\_ VIN: \_\_\_\_\_

I(We) hereby make application for a Duplicate Certificate of Title covering the said motor vehicle, and authorize the same to be delivered to: **Please include a self-addressed stamped envelope.**

Name: \_\_\_\_\_ Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone# \_\_\_\_\_

**I ALSO UNDERSTAND THAT ONCE A DUPLICATE TITLE IS ISSUED ON THIS REQUEST THAT THE ORIGINAL, IF FOUND, IS INVALID AND MUST BE DESTROYED.**

**All parties whose names appear on the Title must sign in the presence of a Notary Public or County Clerk.**

Signature of Applicant \_\_\_\_\_

Signature of Applicant \_\_\_\_\_

\_\_\_\_\_ appeared before me in the  
State of \_\_\_\_\_, County of \_\_\_\_\_, this \_\_\_\_\_ day  
of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public or County Clerk  
My term/commission expires:

OFFICE USE ONLY		
Date Checked in RIS _____	Sales Tax Paid _____	Lien: _____