



CHEROKEE NATION TAX COMMISSION
PO BOX 948
TAHLEQUAH, OK 74465
APPLICATION FOR DUPLICATE CERTIFICATE OF TITLE FOR VEHICLE/BOAT/MOTOR

Model Year and Make _____ Title Number (if known) _____

Vehicle VIN or Hull HIN # _____

Tag/Vessel or Motor Number _____ Registration Decal Number _____

Expiration (month / year) _____

Owners Name _____

Mailing Address _____

City _____ State _____ Zip _____

Daytime Phone Number _____

(Title will be mailed to above address)

I, the undersigned lawful owner of the above described vehicle, hereby state that my certificate of title has been misplaced or destroyed, resulting in this application for a replacement certificate of title. I acknowledge that this replacement title will render invalid all earlier title certificates to this vehicle. I understand that any false statement on this application may subject me to prosecution.

Drivers License Number _____

Signature of Record Owner (s) _____

Cherokee Nation, County of _____

Subscribed and sworn before me this _____ day of _____, _____

My Commission Expires _____

_____, Notary Public