For Office Use	Only	
Date received:		
Issue Date:		
Pickup:	Mail:	

## DUPLICATE CERTIFICATE OF TITLE APPLICATION AND AFFIDAVIT

10.	1 West Main Newcastle, WY 82701		Title #		
	reby make application for vehicle, trailer or mobile h			tle for the following	
	Owner:				
	Prior Title #:		Vin:		
	Year:	Make_	Во	ody:	
shown or des	e best of my knowledge and on the original certificate stroyed ( ). Furthermore, ssession of any other personal	of title. The origing the title has not be on.	al title is (check one) en assigned to any otl	lost ( ), mutilated ( )	
	I authorize the duplicate of	certificate of title b	e mailed to:		
	Name:				
	Address:				
	City:	State:	Zip	:,	
for Ce	reby swear or affirm under rtificate of Title is true and cate of Title.				
	Signature of Applicant:				
	Signature of Applicant:				
Sub	scribed and sworn to befor				
	Seal		Jill Sellers, Weston C	County Clerk	
My Term Expires: My Commission Expires: Wyoming State Statute 31-2-105			Notary Public or County Clerk		

No duplicate shall be issued before the 11th day after the affidavit is filed unless the owner deposits an indemnity bond to the state of Wyoming with the County Clerk in an amount of not less than double the value of the vehicle shown upon the registration of the vehicle. The bond shall be executed by a surety duly authorized to carry on business in Wyoming or by individual sureties qualified as provided by W.S.1-1-104 and 1-1-105.