

Identification of Registration or Amendments

Latest Registration Number

Current Vehicle Owner

Business Name or Last Name

First Name

Middle Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Current Person Claiming Lien

Business Name or Last Name

First Name

Middle Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Changes to be Made

Place an (X) in the appropriate box

Total Discharge (If selected, ALL record of registration(s) will be permanently removed.)

Court Order ▶ Renewal, and/or
▶ Amendment

a. What is the date of the Court Order?

b. In which Judicial District was the Order made?

c. What is the Court File Number?

d. If the court has extended time for seizure, enter the new date:

e. If Amendment is selected, you must attach additional forms as required.

Your Reference Number

Authorized Signature

Name of Person Authorized to Complete this Form (PRINT)

Telephone number

Call Box Number

<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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