

KANSAS
DEPARTMENT OF REVENUE
DIVISION OF VEHICLE
TOPEKA, KANSAS 66626-0001
www.ksrevenue.org/dmv

TITLE HELD BY OUT-OF-STATE LIEN HOLDER

County _____ Transaction ID# _____
Completed by County Treasurer's Office

Owner Information

Owner(s) Name _____

Address City State ZIP

Vehicle Information

Year _____ Make _____ VIN _____
Title Issued by the State of _____

Lien Information

Name of Lien Holder _____ Account No: _____

Address City State ZIP

Reason lien holder will not fax copy of title to county treasurer or inspection station: _____

Conditions

1. After receipt of the out-of-state title from the lien holder, the Division of Vehicles will send a certified copy to the applicant, who will obtain a vehicle identification number inspection through the local Kansas Highway Patrol and return the completed form (MVE-1), *within 30 days*, to the Kansas Department of Revenue, Titles and Registrations Bureau, Docking State Office Building, 915 SW Harrison, Topeka, Kansas 66626-0001.
2. If the inspection is not received by the renewal date on the license plate, the tag *will not be renewed* prior to completion of all requirements.
3. If the titling requirements are not completed in a timely manner, the Division of Vehicles will return the title to the lien holder and issue a pick-up order for the license plate.

I, the undersigned, hereby certify that all the information on this form is true and correct and that I have read the conditions set forth and agree to be bound by the same.

Owner's Hand Printed Name _____

Owner's Signature _____ Date _____

County Treasurer _____