

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 _____

_____ **KS**
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, PO Box 2505, Topeka, KS. 66601.
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 _____