

Mississippi ASSIGNMENT OF LIEN

The lien shown in favor of the undersigned Assignor on the attached Certificate of Title.

\$10.00 Fee

Certificate of Title Number _____

Date of Issuance _____

Issued To _____

Address _____

City, State, ZIP _____

Make _____

Vehicle Identification Number _____

Assigned to _____

Address _____

City, State, ZIP _____

Assigned Date _____

Lienholder (Assignor) _____

Signature of Authorized Representative _____

Name of Witness _____

Address _____

City _____

State _____

ZIP _____

.....
Cut Along Dotted Line

The top half of this form should be kept as a part of your records.

APPLICATION FOR TRANSFER OF LIEN

The undersigned assignee confirms transfer of the lien described above and hereby makes application for a new Certificate of Title subject to the following named liens and none other:

FIRST LIEN

Lienholder _____

Address _____

City _____

State _____

ZIP _____

Date of Lien _____

Lienholder (Assignee) _____

Signature of Authorized Representative _____

SECOND LIEN

Lienholder _____

Address _____

City _____

State _____

ZIP _____

Date of Lien _____

Lienholder (Assignee) _____

Signature of Authorized Representative _____

ORIGINAL MISSISSIPPI CERTIFICATE OF TITLE MUST ACCOMPANY THIS APPLICATION