

APPLICATION FOR CORRECTION OR CHANGE OF NAME

Side B: Any reason for name change - New title requested

For Department Use Only Bureau of Motor Vehicles • PO Box 68593 • Harrisburg, PA 17106-8593

## Side B - New title will be produced

Use this side of the application if your vehicle is currently registered and you want a corrected certificate of title and registration card. **Certificate of Title and \$58 title fee are required with this option.** You will receive a corrected certificate of title and registration card that reflects your name change. **NOTE:** In addition, if your original title has a lien recorded, the lienholder must complete Section F.

## **REASON FOR NAME CHANGE:** Check () appropriate block below.

**Marriage:** Attach a copy of your updated PA Driver's License or PA Photo ID showing the desired name.

**Divorce:** Attach a copy of your updated PA Driver's License or PA Photo ID showing the desired name.

**Court Order:** If your name is changed by permission of the court, attach a copy of your updated PA Driver's License or PA Photo ID showing the desired name.

Pending Divorce: Attach a copy of the written notice to resume a prior surname and an updated PA Driver's License or PA Photo ID showing the desired name. The notice must include the caption and docket number of the proceeding in the divorce and be date stamped from the court.

**Other:** If you desire to use a name other than (1) birth name, (2) spouse's surname, or (3) a name given through a court order, you must provide a copy of an updated PA Driver's License or PA Photo ID showing the desired name.

Α									
	Title Number					Registration Plate Number			
В	APPLICANT INFOR	RMATION							
	Correct Last Name (or Full Bu	usiness Name)	Fi	irst Name	М	iddle Name	PA DL/Photo ID# or Bus. ID#	Date of Birth	
	Correct Co-Owner Last Name	3	F	irst Name	М	iddle Name	PA DL/Photo ID#	Date of Birth	
	Current Street Address			City			State	Zip Code	
С	FORMER NAME								
	Last Name (or Full Business Name) First			First Name	Middle Name				
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D	APPLICATION FOR DUPLICATE TITLE - Appropriate box must be checked (								
	Lost/Destroy	Lost/Destroyed Stolen Defaced (Certificate must be attached) Never Received (Complete address above)						red ress above)	
E	<b>CERTIFICATION</b> - I/We hereby certify under penalty of law that all information given on this application is TRUE and CORRECT. (Date must be listed.)								
	Signature of Owner or Authorized Signer			Signature		of Co-Owner		Date	
F	LIENHOLDER NOTARIZATION - Complete only if Section D is completed and a lien is recorded on the title.								
	SUBSCRIBED AND SWORN TO BEFORE ME:	MO.	DAY	YEAR		Signature of Owne	er or Authorized Signer		
	S T	SIGNATURE OF PERSON ADMINISTERING OATH       A       DO NOT NOTARIZE UNLESS				Title of Authorized Signer			
	A					Telephone Number ( ) Date			
	P PRESENCE OF NOTARY								