

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

# TITLE HELD BY OUT-OF-STATE LIEN HOLDER

County \_\_\_\_\_ Transaction ID# \_\_\_\_\_  
Filled out 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, 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 finished 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 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 \_\_\_\_\_