

### APPLICATION FOR CORRECTION OR CHANGE OF NAME

Side A: Marriage or Divorce - No new title requested.

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

# Side A - No new title will be produced

This side of the application can only be used if the name change is a result of marriage, divorce or pending divorce.

If your vehicle is currently registered and you only want a corrected registration card, but not a corrected certificate of title, or your lienholder participates in the Electronic Lien Title Program, use this side of the application. No fees are required with this option.

#### If you or your lienholder want a corrected certificate of title, you must use Side B.

#### **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.

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.

Check here if your title is being held by a lienholder that participates in the Electronic Lien and Titling (ELT) Program. **No Title Will Be Attached.** (Check with your lienholder to determine if they participate in the ELT Program.)

Α	VEHICLE INFORMATION										
	Title Number	Registration Plate Number									
В	APPLICANT INFORMATION										
	Correct Last Name (or Full Business Name)	First Name	Middle Nam	e PA DL/Photo ID# or Bus. ID#	Date of Birth						
	Correct Co-Owner Last Name	First Name	Middle Nam	e PA DL/Photo ID#	Date of Birth						
	Current Street Address										
	City			State	Zip Code						
С	FORMER NAME										
	Last Name (or Full Business Name)	First Name		Middle Name							
D	<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								
	Applicant's Telephone Number	Date									



APPLICATION FOR CORRECTION OR CHANGE OF NAME

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

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## 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	VEHICLE INFORMATION								
	Title Number			Registration Plate Number					
В	APPLICANT INFORMATION								
	Correct Last Name (or Full Business Name)	First Name	Midd	dle Name	PA DL/Photo ID# or Bus. ID#		Date of Birth		
	Correct Co-Owner Last Name	First Name	Mide	dle 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 Name			Middle Name				
D	APPLICATION FOR DUPLICATE TITLE	APPLICATION FOR DUPLICATE TITLE - Appropriate box must be checked (							
	Lost/Destroyed Stoler		Never Received						
_		(Certificate must be				e attached) (Complete address above)			
E	CERTIFICATION - 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			Signature of Owner or Authorized Signer					
	TO BEFORE ME: MO. DAY	YEAR							
	SIGNATURE OF PERSON ADMINISTERING OATH			Title of Authorized Signer					
	T								
	A DO NOT NOTARIZE UNLESS   M SIGNED BY LIENHOLDER IN			Telephone Number					
	P PRESENCE OF NOTARY			Date					