



**SENECA-CAYUGA TRIBAL TAX COMMISSION**  
**Motor Vehicle Division**  
**P.O. Box 1283**  
**Miami, OK 74355**

**APPLICATION FOR DUPLICATE TITLE**

Model Year \_\_\_\_\_ Manufacturing  
And Make \_\_\_\_\_ Model \_\_\_\_\_

Title Number \_\_\_\_\_ VIN Number \_\_\_\_\_

Tag Number \_\_\_\_\_ Registration Expires \_\_\_\_\_

Owners Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Reason for Requiring  
This Duplicate Title \_\_\_\_\_

I, the undersigned, lawful owner of the above-described vehicle, hereby make application for a Duplicate Title with full knowledge that any false statement may subject me to prosecution. **I further understand there is a \$25.00 fee for the duplicate title.**

Name \_\_\_\_\_ Tribal Enrollment Card # \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_

My Commission expires \_\_\_\_\_ Notary Public \_\_\_\_\_

Commission # \_\_\_\_\_

Seneca-Cayuga Tribal Tax Commission Use Only

Received By \_\_\_\_\_

Process Date \_\_\_\_\_