



New Title Number (Office Use Only)

APPLICATION FOR DUPLICATE WATERCRAFT TITLE

Title Number of Missing Document		Hull Identification Number									
Registration Number MN	Make	Model				Year					
Owner's Full Name (Last, First, Middle)					Drivers License Number					Date of Birth	
Add'l Owner's Full Name (Last, First, Middle)					Drivers License Number					Date of Birth	
Owner's Address (Number and Street, RFD, Box No., City, State, Zip Code)											
Must Be Answered: The Document Must Be Replaced Because It Was:											
<input type="checkbox"/> Stolen				<input type="checkbox"/> Destroyed							
<input type="checkbox"/> Mutilated (Attach Mutilated Document)				<input type="checkbox"/> Lost							
<input type="checkbox"/> Illegible (Attach Illegible Document)				<input type="checkbox"/> Never Received							
Reminder: Prior to January 1, 2012 the title may be with the lending institution.											

I (we), having been duly sworn, do certify all of my (our) declarations are true and correct. I (we) am (are) the owner(s) of this watercraft and the original document has not been assigned and/or surrendered to anyone.

Owner's Signature	Date
Owner's Signature	Date

Application fee for duplicate watercraft title is \$11.00.

If applying by mail, make remittance to:
 MN Department of Natural Resources
 License Center
 500 Lafayette Rd
 St. Paul, MN 55155-4026

Important Notice

A duplicate certificate of title will be issued only to the owner or legal representative of the owner (proof of power of attorney required) named on the original certificate. If the original certificate of title is recovered, it must be returned to the Department of Natural Resources, License Center. All data collected is required. This data is used to identify your watercraft. Failure to provide required data may result in the denial of the requested action. **All returned checks will be charged a \$30.00 service fee, pursuant to MN statutes 604.113, Subd. 2. (a) and 609.535, Subd. 2a.**

Duplicate titles must be mailed to the owner. If the duplicate title is to be mailed to a different address than above, please indicate the address below.

Name:	Secondary Address Number, Street, City, State, Zip