



SKIP THE TRIP!

This sheet must be on top of the submitted documents to ensure fastest processing.

Owner Name(s): _____

Daytime Phone Number: _____

E-mail Address: _____

Mailing Address: _____

Transaction Requested:

____ Colorado Title (See the following pages for documents required.)

____ Duplicate or Lien Release Colorado Title

____ Colorado Plates & Registration

Note: If you only want to get plates, your vehicle’s title or MSO must first be established in your name as a Colorado title before you can register your vehicle. Title and registration can be done at the same time.

Note: Proof of current Colorado insurance for this vehicle is required for registration.

Transfer credit from a current plate from a previous vehicle: _____

Note: credit is only available from plates with a common owner that have not yet expired.

Date previous vehicle with credit was sold or surrendered: _____

Do you want the \$29 Colorado State Parks Pass? Yes: ____ No: ____

Mail the new plates?

____ Please mail them. (Additional \$5 fee.)

____ I will pick them up from 215 W 10th St RM 108 at Information Desk.

____ I have a specialty plate to re-use (list plate number): _____

Paperwork Delivery Instructions

Original Documents are required to process a title!

You may mail your original documents to one of the addresses below OR **drop them off in our dropbox located inside the Pueblo County Historic Court.**

UPS/FedEx Delivery: (And drop box location) Pueblo County Department of Motor Vehicle Attn: Skip the Trip 215 W 10th St RM 108 Pueblo CO 81003	Regular Mail: Pueblo County Department of Motor Vehicle Attn: Skip the Trip P.O. Box 878 Pueblo CO 81002
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Once your paperwork is completed, we will call you or send you an email with the amount due.

Please periodically check your spam e-mail folder or prepare to receive a call from us at the number below. If you have any questions, you may also contact us by using the same e-mail or phone number.

E-mail: skiphethrip@pueblocounty.us

[soon to be skiphethrip@pueblocounty.gov](mailto:skiphethrip@pueblocounty.gov)

Phone: 719-583-6507

Allow 5-10 business days for processing of your registration.

Allow an additional 4-6 weeks for receipt of the title (unless the purchase was financed).

Documents received in the last week of the month will be processed in the first week of the next month.

Pueblo County will not be liable for any plates or year tabs that may get lost in the mail.

If your plates or year tabs do not arrive at the address provided on your documents, you will need to come to our office to replace them for an additional cost.

Required Title Documents

Colorado Duplicate or Lien Release Title

These documents are required to:

- Get duplicate copy of a title.
- Remove a lien-holder.
- Or any combination of the above.

You will need to send in:

1. Cover Sheet – This should be placed on the top of all documents.
2. DR2539A Duplicate Title/Lien Request and Receipt
3. The Colorado Title – You can e-mail us photos of your title to check if it's filled
Method of Payment – Enclose a check for \$8.20 (Duplicate fee) or \$7.20 (Lien Release fee) per title or complete one of our payment authorization forms.

Note: A new registration is not required for title maintenance transactions.

Duplicate Title/Lien Request and Receipt

C.R.S. 42-6-125, 42-6-126, 42-6-135, 42-6-137

Sections in **bold text** represent required information. If any bolded field is left blank, your application will be rejected.

This Statement Must Be Signed By Owner, Agent or Lienholder

I certify, under penalty of perjury in the second degree, that the title for this vehicle will be issued to me as:

(Check One)	Owner	Agent	Lienholder
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and the original title has been lost or destroyed, has not been assigned or transferred, and is subject only to lien(s) shown on State Motor Vehicle records. I understand that this duplicate title will be the only valid certificate of title and the original and any previously issued duplicate title(s) will be void.

Printed Name as it Appears on Identification of Owner, Agent, or Lienholder (include firm name if applicable)

Signature of Owner, Agent, or Lienholder

Date (MM/DD/YY)

Identification of individual signing above:

Colorado DL	Colorado ID	Other
ID Number	Expires	DOB (MM/DD/YY)

Witness Signature (required). The undersigned witness affirms that the named owner of the vehicle identified in this document presented the identification described above.

Witness Printed Name

Witness Signature

Date (MM/DD/YY)

Please Provide Mailing Address Below.

To Expedite, Please Include a Self Addressed Stamped Envelope.

Name

Street Address

City **State** **ZIP Code**

Procedure For A Duplicate Colorado Title

To comply with Colorado Laws this procedure is to be followed when applying for a Colorado duplicate title.

1. Complete and sign the **Duplicate Title/Lien Request and Receipt** title application (DR 2539A). The application must be signed by the owner, lienholder, or authorized agent by power of attorney of the vehicle listed on this form. The individual signing the duplicate title application must provide identification information.
2. Colorado duplicate titles can only be applied for by the owner, lienholder, or an authorized agent. If the authorized agent applies for the duplicate title, they must submit a Power of Attorney (POA) signed by the owner or lienholder. If the Power of Attorney form used **does not** have a place for the grantor's identification information, a [DR 2842](#) Supplemental Secure and Verifiable Identification Information and Attestation Clause must also be submitted.
Do not send photocopies of identification or original identification card(s), such as Driver's license or Passport. If the POA is VIN specific, the original must be submitted and will be returned upon request. If a General POA is submitted, a photo copy or fax copy is acceptable (notary seal must be visible on copy) and must be included with **each** application. The [DR 2175](#) (Colorado POA) and the [DR 2842](#) are available at the County Motor Vehicle offices, the Vehicle Services Section, or online at [DMV.Colorado.gov](#).
3. A lien release is required for all active liens. The lien release must be on the lienholder's letterhead (letterhead is not required if the lienholder is an individual). Photo and fax copies are accepted and must include **vehicle year, make, VIN, titled owner's name(s), agent's signature, date of lien release and must be signed under penalty of perjury in the second degree or notarized declaration as defined in C.R.S. 18-8-503.**
The title will be issued omitting all reference to the lien pursuant to C.R.S. 42-6-126.
4. All duplicate title transactions require identification. Secure and Verifiable ID (see form DR 2841) is required for titles issued on or after July 1, 2006.
5. If you are applying as lienholder and the lien is **Not Filed** in Colorado, you must include a Power of Attorney from the owner, (see step 2 above) or, in the case of repossession, include a Statement of Repossession **and** a certified copy of the security agreement.
6. **Mail-in requests:**
The fee for a duplicate title is \$8.20 pursuant to C.R.S. 42-6-137 (5). The fee for a lien release title is \$7.20 pursuant to C.R.S. 42-6-137(4). Make checks payable to the Colorado Department of Revenue.
Submit applications by **Regular Mail** to:
Department of Revenue, Vehicle Services Section, PO Box 173350 Rm 150, Denver, CO 80217-3350
Dropped off at:
DMV Drop Box, Vehicle Services Section, 1881 Pierce Street, Lakewood, CO 80214
In-Person/Physical Address: Submit applications to:
Colorado Department of Revenue, Vehicle Services Section, 1881 Pierce Street, Lakewood, CO 80214
E-Services: [myDMV.Colorado.gov](#) (For quickest processing, please utilize this option)
Agents acting on **behalf of a business** must provide a Power of Attorney (POA) or a Letter of Authorization (LOA).
7. If your application has been rejected, return the original DR 2539A with the additional information required.
Checks submitted with rejected applications will not be returned and are destroyed by the Department.

State of Colorado Statement of One and the Same

Name of Person or Name of Company One

and

Name of Person or Name of Company Two

Are one and the same..... Person Company

I certify under penalty of perjury in the second degree, that the above statements are true and accurate to the best of my knowledge.

Signature



E-Check Authorization Form
719-583-6507

PLATE #/VIN #: _____

KCW PASS (STATE PARKS PASS): Y _____ N _____

Account Type (please mark one)

- Personal Checking Account
- Personal Savings Account
- Business Checking Account
- Business Savings Account

Routing Number _____

Account Number _____

Check Number: NOT NEEDED

Account Holder Name _____

Billing Address:

Phone Number (____) _____

E-mail _____

____ CHECK HERE IF YOU WOULD LIKE A CALL WITH THE PAYMENT AMOUNT BEFORE PAYMENT IS

PROCESSED. I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. The charge will show on my statement as CO Motor Vehicle Services. There will be a \$1.00 processing fee for all e-checks.

Signature: _____

Date: _____

******PLEASE ATTACH PROOF OF INSURANCE******

****COUNTY USE ONLY** DATE OF TRANSACTION:** _____



CREDIT CARD PAYMENT AUTHORIZATION

719-583-6507

PLATE #/VIN #: _____

KCW PASS (STATE PARKS PASS): Y _____ N _____

Card Number:

Expire Date: ____/____ CVV _____ (3 or 4 digit code on back of card)

Card Holder Name: _____

Billing Address:

____ CHECK HERE IF YOU WOULD LIKE A CALL WITH THE PAYMENT AMOUNT BEFORE PAYMENT IS PROCESSED.

Phone Number: (____) _____

E-mail: _____

I am requesting payment of my full registration and/or title fees. Please accept my signature of authorization for the charge. The charge will show on my statement as CO Motor Vehicle Services. Credit cards will have an additional processing fee of less than 3%.

Signature: _____

Date: _____

*****PLEASE ATTACH PROOF OF INSURANCE*****

****COUNTY USE ONLY** DATE OF TRANSACTION:** _____