MVT 5-27
3/99

ALABAMA DEPARTMENT OF REVENUE

MOTOR VEHICLE DIVISION
TITLE SECTION
P. O. Box 327640 • Montgomery, Alabama 36132-7640

Returned Title Request Form

This form must be completed by the owner or lienholder and mailed to the address listed above whenever an Alabama Certificate of Title has been returned by the United States Postal Service as undeliverable.

TYPE OR PRINT ONLY

ALL OF THE FOLLOWING INFORMATION MUST BE COMPLETED:

Vehicle Identification Number: _____

Year Model: _____ Make: _____ Model: _____

Name of Owner(s): _____

Name of First Lienholder *(if any)*: _____

I/We hereby request that the Alabama Certificate of Title that was returned to the Alabama Department of Revenue by the United States Postal Service be mailed to the following address:

NOTE: If there is a recorded lienholder on the Alabama Certificate of Title, the Code of Alabama requires that the Certificate of Title be mailed to the first lienholder.

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Type or Print Name of Individual
or Company Requesting Title: _____

NOTE: If anyone other than the owner or lienholder is requesting the title, a Power of Attorney must accompany the request.

Signature of Individual or
Authorized Representative
of Company Requesting Title: _____ Date: _____

Printed Name of Individual or
Authorized Representative
of Company Requesting Title: _____

PLEASE ALLOW 15 WORKING DAYS FOR PROCESSING.

NOTE: NO FEE IS REQUIRED TO BE SUBMITTED WITH THIS FORM.