

KANSAS

DEPARTMENT OF REVENUE
DIVISION OF VEHICLE
TOPEKA, KANSAS 66626-0001
www.ksrevenue.org

LIEN RELEASE

Fax # For Liens (785) 296-2383

VIN: _____ Year: _____ Make: _____

OWNER'S INFORMATION (Last, First, Middle Initial)

Name: _____

Name: _____

_____ Address _____ City _____ State _____ ZIP _____

LIENHOLDER INFORMATION: The lienholder listed below certifies that their lien for the vehicle listed herein for the owner(s) shown above has been satisfied and is hereby released.

Lienholder Name: _____

Signed by: _____

Subscribed and Sworn before me this _____ day of _____, 20_____.

Notary Public _____ County _____ State _____

My Commission expires on _____ Seal

TITLE TO BE MAILED TO: _____ **REQUIRED (Must be completed)**

NAME: _____

MAILING ADDRESS: _____

CITY, STATE, AND ZIP CODE: _____

INSTRUCTIONS

- The release of lien for a previously **issued paper title** may be accomplished by attaching this completed form to the title, or by completing the lien release section on the face of the title. The title and/or accompanying release should be forwarded to the person satisfying the lien, or purchasing the vehicle.
- The release of lien for an **electronic title** may be accomplished by providing this completed form to the person who satisfied the lien, purchased the vehicle, or requested the release, and/or by faxing it to the Title & Registration Bureau at (785) 296-2383.
- The mailing instructions for the title must be completed. Please do not fax the release more than once.