



OSAGE NATION TAX COMMISSION

239 W 12th St
Pawhuska, OK 74056
PHONE: (918)-287-5993
FAX: (918)-287-5503

TITLE REQUEST AFFIDAVIT TO REQUEST NAME(S) CHANGE

Please be ensure to circle (add or delete)

If two or more owners are listed as (&) you must provide all signatures notarized

MAKE _____ YEAR _____ MODEL _____
TAG _____ DECAL _____ TITLE # _____
VIN # _____

I, _____ legal owner of the listed vehicle hereby requests to
(ADD\DELETE) _____ (TO\FROM) my title. I have notified my lien
holder _____, if applicable, and am attaching a letter of approval from
said lien holder.

OWNER AS SHOWN ON TITLE

Subscribed and sworn to this _____ day of _____, 20____
My Commission expires: _____ My Commission # _____
Notary Public _____

OWNER AS SHOWN ON TITLE

Subscribed and sworn to this _____ day of _____, 20____
My Commission expires: _____ My Commission # _____
Notary Public _____