



STORY COUNTY TREASURER

www.storycountyiowa.gov
 900 6th St. - P.O. Box 498
 Nevada, IA 50201

LOST IN MAIL FORM

****Complete This Form in Ink****

Select All That Apply

	TITLE
	REGISTRATION
	REGISTRATION & PLATES

VIN:	
TITLE #:	
PLATE:	
OWNER(S):	

I hereby certify that the document for which I have made application for was mailed to me by the Story County Treasurer's Office through the United State Postal Service (USPS) and has not been received by me.

I have not received the title and/or plates or registration that was sent by mail more than 20 but no more than 60 days ago. If I should receive any of these documents, I will return it to the Story County Treasurer's office immediately.

****If a replacement title is being requested please include an application for replacement title.****
****Replacement titles print after a 5 day hold.****

Date: _____

X

 SIGNATURE OF OWNER 1:

X

 SECURITY INTERST HOLDER BY:

OR

X

 SIGNATURE OF OWNER 2: