

LYON COUNTY TREASURER
206 S. 2ND AVE.
ROCK RAPIDS, IA 51246
(712)472-8509

AFFIDAVIT OF LOST TITLE

I hereby certify that the title for which I am applying for replacement, mailed to me by the county treasurer through the United States Postal Service, has not been received by me. If I receive the original document, I agree to return it to the County Treasurer not later than five (5) days from the date I receive it. I also understand that there is a **20 day waiting period** from the time the title was issued to the time when a replacement title can be issued to me.

Name: _____

Date: _____