APPLICATION TO ADD A LIEN HOLDER

Wisconsin Department of Transportation
MV2052 8/2024 Wis. Stat. § 342.19

To list an additional lien holder on a Wisconsin title, complete the form below. If this is a change in ownership, please use the MV1 or MV11 Wisconsin Title & License Plate Application instead.

Owner Information

Name		Birth Date (M M / D D / Y Y Y Y)
SSN (1 2 3 – 4 5 – 6 7 8 9)	Wisconsin Driver License Number (1 2 3 4 – 5 6 7 8 – 9 10 11 12 – 13 14)	FEIN Number (if company owned) (1 2 – 3 4 5 6 7 8 9)
Street Address (include P.O. Box if applicable)	City	State / Zip Code

Vehicle Information

Vehicle Identification Number *(standard VIN has 17 characters)* (1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17)	Year	Make	Type (Car, Truck, Van, etc.)

Loan Information

Name of Lending Agency(s) or Person(s)	Secured Party Number(s) (1 2 3 4 5 6 7 8)	(Area Code) Telephone Number
Street Address (include P.O. Box if applicable)	City	State / Zip Code

Submit the original vehicle title, this application and $10.00 loan filing fee (as well as a $5 loan processing fee and $20 surcharge if applicable) to:

Wisconsin Department of Transportation
PO Box 7949
Madison WI, 53707-7949

Make a check payable to Registration Fee Trust

If the Wisconsin title is not available because it is being held by a lien holder, please list the existing lien holder below.

EXISTING LIEN HOLDER

Name of Lending Agency(s) or Person(s)	Secured Party Number(s) (1 2 3 4 5 6 7 8)	(Area Code) Telephone Number
Street Address (include P.O. Box if applicable)	City	State / Zip Code

Release of non-exempt information

Under Wisconsin Open Records Law, the Wisconsin Department of Transportation must provide information from its records to requesters. If you do not want your name and address included in requests we receive for ten or more records, you may ask the department to withhold your name and address from those lists by checking the box below.

☐ Opt Out

ADA - The Wisconsin Department of Transportation complies with the Americans with Disabilities Act.

Signature

I certify that the information and statements on this application are true and correct.
Commercial Carrier: *I further certify that I have knowledge of applicable federal and state motor carrier safety rules, regulations, standards, and orders, and declare that all operations will be conducted in compliance with such requirements.*

(Owner Signature) (Date)