MV-900.1 (6/04)

New York State Department of Motor Vehicles

NOTICE OF LIEN - CHARGE ACCOUNT CUSTOMER

www.nysdmv.com

All information *(other than signature)* must be typed. **Use caution when entering Vehicle, Hull or Manufactured Home ID number. Liens will *not* be recorded if information is illegible, incorrect or incomplete.**

VEHICLE/BOAT/MANUFACTURED HOME INFORMATION

Your DMV Charge Account Number: 2008878

Identification Number		This is a: ☐ Vehicle ☐ Boat ☐ Trailer ☐ Manufactured home	
Year	Make	Body Type/ Hull	Registration/Plate No. of Borrower, if any

OWNER INFORMATION

Owner's Last Name	First	M.I.
Owner's Last Name	First	M.I.
Street Address		Apt. No.
City	State / Zip Code	☐ Check here if this is a new address

NOTE: Lien will be recorded only if the name(s) listed as the owner(s) is **EXACTLY** the same as the owner(s) recorded, or to be recorded, on the Certificate of Title. If a Certificate of Title has not been issued to this borrower, print the name as it appears on the driver license.

OWNER'S STATEMENT: I understand that the lienholder will send this notice to the DEPARTMENT OF MOTOR VEHICLES. If a title was previously issued in my name for this vehicle, boat, trailer or manufactured home, I gave it to the lienholder to be sent to DMV with this notice. I understand that a new Certificate of Title, showing the lienholder's name, will be mailed to me.

OWNER(S): SIGN HERE ▶ _____ ▶ _____ Date _____

(Must be an original signature. If a POA is used, a copy of the POA must be attached.) (Must be an original signature. If a POA is used, a copy of the POA must be attached.)

If signing for a corporation, print your name and title: _____ _____

(Name) (Title)

LIEN INFORMATION

Lien Filing Code (assigned by DMV: enter only if a code has been assigned to you or your company) 34088

Lienholder's Name	Central Hudson Employees FCU
Lienholder's Name (continued)	
Street Address	284 South Avenue
City / State / Zip Code	Poughkeepsie / NY / 12601

This notice authorizes the Department of Motor Vehicles to disclose (or otherwise make available) information about the lienholder obtained by the department in connection with this record.

▶ _____ Date of Security Agreement _____

(Lienholder's Signature—Must be an original signature or a facsimile stamp)

Has a NY Certificate of Title been issued to this borrower? ☐ YES ☐ NO *IF YES, ATTACH TITLE.*

LIENHOLDER: *Mail this form and the owner's title (if issued) to*:
TITLE BUREAU, NEW YORK STATE DEPARTMENT OF MOTOR VEHICLES PO BOX 2604, ALBANY, NY 12220-0604

You can verify online if a lien was recorded or if a title certificate was issued.
Go to the Lien/Title Certificate Status page at the DMV web site: **www.nysdmv.com/titlestat/default.html**

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DO NOT DETACH THIS RECEIPT

YOUR DMV CHARGE ACCOUNT NUMBER: 2008878

PLEASE TYPE LIEN FILING CODE, AND NAME AND ADDRESS OF THE ACCOUNT TO BE CHARGED:

Lien Filing Code: 34088	Vehicle Identification Number (VIN):	
Account Name: Central Hudson Employees FCU		
Street Address: 284 South Avenue		Apt. No.
City or Town: Poughkeepsie	State: NY	Zip Code: 12601