ABSENTEE SHAWNEE TRIBE OF OKLAHOMA
TAX COMMISSION
2025 S. Gordon Cooper Dr.
Shawnee, OK 74801
(405) 275-4030 Fax (405) 214-4225

REQUEST FOR MOTOR VEHICLE DOCUMENT(S) REVISION

Proper documentation must be presented to the AST Tax Commission.

I/We, the undersigned, am/are the legal owner(s) of a:

_____

Year Make Model Vin#

AST Tag #, if applicable: _____

I/We, the undersigned, hereby request the following revision(s) be made to the to the above described vehicle's title and/or registration:

° Add the following name(s) to the AST Vehicle Certificate of Title:
_____
_____

° Remove the following name(s) from the AST Vehicle Certificate of Title*:
_____
_____

° Address change or correction:
_____
_____

° Other: _____
_____

_____ _____
Registered Owner Signature Date

Subscribed and sworn to before me on this ____ day of _____, 20____

_____ _____
Notary Public (seal) My Commission Expires

*Name(s) on titles with active liens *can not* be removed from the title until lien has been released. Must provide documentation.