



WICHITA TAX COMMISSION PO Box 547, ANADARKO, OK 73005

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Gary McAdams, Chairman
Sandra Wilson, Secretary/Treasurer
Roger Bruce Birch, Member
Katherine Cunningham, Member
Gladys Walker, Member

Verna Wetselline, Tax Administrator
Leah Kaulaity, Administrative Assistant
E'Vonne Zumwalt, Tag Agent

APPLICATION FOR REPLACEMENT TAG/DECAL/REGISTRATION

I, _____, the undersigned, am reporting the loss/theft of my Motor Vehicle ___ Tag ___ Decal ___ Registration on the following described vehicle:

VIN#: _____

MAKE: _____

MODEL: _____

YEAR: _____

TITLE: _____

TAG#: _____

DECAL#: _____

EXPIRATION DATE: _____

DATE YOU BECAME AWARE OF LOSS/THEFT: _____

OTHER INFORMATION: _____

REASON FOR REQUESTING REPLACEMENT: _____

In the event the Tag/Decal/Registration is found I will immediately notify the Wichita Tax Commission.

NAME _____ DATE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

TAX COMMISSION REPRESENTATIVE _____ DATE _____

COPY OF POLICE REPORT MUST BE ATTACHED FOR LOST/STOLEN TAG