



# Certified Lienholder Change Request

|  |
|--|
| <p><b>Information</b></p> <p>This form is only for use by existing financial institutions who are certified lienholders or participating in the Texas Electronic Lien and Title (ELT) program. If you are a <u>new</u> financial institution wishing to be a certified lienholder or to participate in the ELT program, please complete the <i>Certified Lienholder Intake</i> form.</p> <p>The name and address provided in the "Financial Institution Information" section will be the name and address populated to the Texas title record.</p> |
|--|

|  |
|--|
| <p><b>Change Request Type</b></p> <p>Select Applicable Change Request Type</p> <p><input type="checkbox"/> <b>Name</b>      The financial institution's name has changed. This will be effective on records once implemented. Some TxDMV systems will continue to reflect the name as it appeared at the time the title record was created. <b>REQUIRED: Attach an explanation on the financial institution's letterhead, signed by an authorized agent of the financial institution, explaining the reason for the name change (e.g. rebranding, merger, acquisition).</b></p> <p><input type="checkbox"/> <b>Address</b>      The financial institution's address has changed. This will be effective on records once implemented. Some TxDMV systems may continue to reflect the address as it appeared at the time the title record was created.</p> <p><input type="checkbox"/> <b>Service Provider</b>      The financial institution is changing from one service provider to another. The financial institution and service providers are responsible for the transfer of records within the service providers' systems. <b>NOTE: A new Service Level Agreement must be completed between the new service provider and the financial institution.</b></p> <p><input type="checkbox"/> <b>Contact</b>      The technical contact or the <i>Service Level Agreement</i> contact information has changed. Complete the "Change Contact Information" section below to reflect the new contacts.</p> <p><input type="checkbox"/> <b>Withdraw</b>      The financial institution wishes to withdraw from the certified lienholder or ELT program. Prior to the TxDMV processing this request for an ELT lienholder, the ELT lienholder must release all existing electronic titles or request those electronic titles be converted to paper through their current service provider.</p> <p><input type="checkbox"/> <b>Other (explain)</b> _____</p> |
|--|

|   |  |
|---|--|
| <p><b>Implementation Information</b></p> <p>Desired Implementation Date</p> | <p><b>Note:</b> Actual implementation date will be determined by the Texas Department of Motor Vehicles.</p> |
|---|--|

|   |                      |   |                            |
|---|----------------------|---|----------------------------|
| <p><b>Financial Institution Information – All information with the change request reflected</b></p>   |                      |   |                            |
| Name (max. 30 characters)   |                      | Federal Employer Identification Number (FEIN) |                            |
| Address Line 1 (max. 30 characters)   |                      |   |                            |
| Address Line 2 (max. 30 characters)   |                      |   |                            |
| City (max. 19 characters)   | State (2 characters) | Country (max. 4 characters)                   | Postal Code (9 characters) |
| Service Provider (Entity Submitting/Receiving Processing Files)   |                      |   |                            |
| <input type="checkbox"/> SecureTA <input type="checkbox"/> Dealertrack <input type="checkbox"/> Decision Dynamics, Inc. <input type="checkbox"/> PDP Group <input type="checkbox"/> VINtek, Inc. <input type="checkbox"/> None - Lienholder Self Processing |                      |   |                            |
| <input type="checkbox"/> Other (Name): _____  |                      |   |                            |

|  |  |
|--|--|
| <p><b>Change Contact Information – if applicable</b></p> |  |
| Type   |  |
| <input type="checkbox"/> Technical Contact Information   | <input type="checkbox"/> Service Level Agreement Contact Information |
| Name of Entity   |  |
| Individual's Name  |  |
| Phone Number   | Email  |