

Certified Lienholder Change Request

Information

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 new financial institution wishing to be a certified lienholder or to participate in the ELT program, please complete the *Certified Lienholder Intake* form.

The name and address provided in the "Financial Institution Information" section will be the name and address populated to the Texas title record.

Change Request Type

Select Applicable Change Request Type

- ☐ **Name** 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. **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).**
- ☐ **Address** 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.
- ☐ **Service Provider** 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. **NOTE: A new Service Level Agreement must be completed between the new service provider and the financial institution.**
- ☐ **Contact** The technical contact or the *Service Level Agreement* contact information has changed. Complete the "Change Contact Information" section below to reflect the new contacts.
- ☐ **Withdraw** 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.
- ☐ **Other (explain)** _____

Implementation Information

Desired Implementation Date

Note: Actual implementation date will be determined by the Texas Department of Motor Vehicles.

Financial Institution Information – All information with the change request reflected

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)			
☐ SecureTA ☐ Vitu ☐ Decision Dynamics, Inc. ☐ PDP Group ☐ VINtek, Inc. ☐ None - Lienholder Self Processing			
☐ Other (Name): _____			

Change Contact Information – if applicable

Type	
☐ Technical Contact Information	☐ Service Level Agreement Contact Information
Name of Entity	
Individual's Name	
Phone Number	Email