



Kiowa Tribe

Tax Commission Department

P. O. Box 369 – Carnegie, Oklahoma 73015

Phone: (405) 901-9271 – Email- tag@kiowatribe.org

Sibling Consent to Add Individual to Vehicle Title

Section 1: Vehicle Information

Please provide accurate details regarding the vehicle in question.

- Year: _____
- Make: _____
- Model: _____
- VIN (Vehicle Identification Number): _____
- Current Title Holder(s): _____

Section 2: New Title Addition Request

We, the undersigned siblings, hereby give our full consent to add the following individual to the vehicle title:

- Full Name of Sibling to be Added: _____
- Relationship to Current Title Holder(s): _____



Non-Contest Declaration

We, the undersigned siblings, hereby declare and affirm the following:

1. We have voluntarily reviewed, understood, and signed the "Sibling Consent to Add Individual to Vehicle Title" form.
2. We acknowledge that our signatures were made freely and in the presence of a Notary Public.
3. We understand the implications of adding the designated sibling to the vehicle title.
4. We affirm that we will not challenge, dispute, or contest the validity, intent, or terms of the signed form in any legal or administrative proceeding.



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Sibling Signature & Notary Section

Sibling Name: _____

Signature: _____

Date Signed: _____

State of _____

County of _____

On this _____ day of _____, **20**____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that he/she executed the same for the purposes therein contained.

Notary Signature: _____

Printed Name: _____

My Commission Expires: _____

Notary Seal:

Sibling Signature & Notary Section

Sibling Name: _____

Signature: _____

Date Signed: _____

State of _____

County of _____

On this _____ day of _____, **20**____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that he/she executed the same for the purposes therein contained.



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Sibling Signature & Notary Section

Sibling Name: _____

Signature: _____

Date Signed: _____

State of _____

County of _____

On this _____ day of _____, **20**____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that he/she executed the same for the purposes therein contained.

Sibling Signature & Notary Section

Sibling Name: _____

Signature: _____

Date Signed: _____

State of _____

County of _____

On this _____ day of _____, **20**____, before me, the undersigned Notary Public, personally appeared _____, known to me (or satisfactorily proven) to be the person whose name is subscribed to this document, and acknowledged that he/she executed the same for the purposes therein contained.

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Notary Seal: