
LOUISIANA ELT LIEN CODE APPLICATION INSTRUCTIONS

Louisiana Dept. of Motor Vehicles (LA DPS), Office of Motor Vehicles (OMV) Electronic Lien and Title Program (ELTP)

To obtain an ELT Lien Code, please fill out the ELT Lien Code Application according to the following instructions:

1. **Lender**

- **Enter the Lender's (Financial Institution) name as it would appear as a lien on a motor vehicle title (include abbreviations, if applicable).**

The name that is stated on this application will be the exact spelling of the Lender when the assigned ELT Lien Code is utilized for the recordation of the lienholder on a LA OMV vehicle record. If there is a variation(s) in the spelling of the Lender's name (including abbreviations), a separate ELT Lien Code Application is required. An additional ELT Lien Code will be assigned for each particular spelling.

2. **Federal Identification Number (EIN#)**

- **Enter the Lender's Federal Identification Number.**

3. **Mailing Address of Lender**

- **Enter the Lender's (Financial Institution) mailing address as it would appear as the lien's address on a motor vehicle title (include abbreviations, if applicable).**

This address is recorded to each motor vehicle record within the LA DPS OMV State System as the Lien holder's address. When a paper motor vehicle title is printed and the lien is remaining on the motor vehicle record, the paper title is mailed to this address. If there is more than one mailing address that is used as the Lien holder's address, a separate ELT Lien Code Application is required. An additional ELT Lien Code will be assigned for each mailing address.

4. **Title Management Solutions CO (TMC)**

- **Enter the name of the Title Management Solutions Company acting as agent on the lender's behalf who manages the Lender's motor vehicle titles.**

All ELT Lien Confirmations, requests, notifications, and ELT LA OMV files associated to the Lender (including the ELT Lien Code) will be managed by the TMC.

5. **Lender Contact Information**

- **Enter the Lender's Key Contact Information of the LA ELTP (TMC contact info is acceptable)**

6. **Requested Activation Date**

- **Enter the Date of activation within the LA ELTP.**

Beginning on this date, the Lender's ELT Lien Code is activated and can be utilized for the recordation of liens on LA OMV records.

7. **Lender Authorized Representative**

- **An Authorized Representative of the Lender signs, prints their name and position.**

This authorizes Dealertrack Registration and Titling Services (RTS) to enter the Lender's information, as stated on this application, in the LA DPS OMV State Computer System. As a result, the LA OMV State System will assign the Lender an ELT Lien Code.

Please email a signed LA ELT Lien Code Application and LA ELTP agreement to eltsupport@autotitle.com.

Please return the originals (form and agreement) to:

**Dealertrack Registration and Titling Services
Attention: ELT Department
3939 Veterans Blvd, Suite 204
Metairie, La 70002**

A copy of this application form will be returned to the TMC or Lender stating the assigned ELT Lien Code along with instructions regarding the use of the ELT Lien Code.

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LOUISIANA ELT LIEN CODE APPLICATION

LENDER INFORMATION

Lender Institution Name: _____ Federal Identification Number (FIN): _____

Street Address: _____

City: _____ County: _____ State: _____ Zip: _____

All ELT lien confirmations, requests and notifications associated with this lender (including this assigned LA ELT Lien Code) shall be managed by the following, acting as agent on their behalf:

Title Management Solutions Co: _____

LENDER CONTACT INFORMATION

LA ELTP Key Contact: _____

Telephone: _____ Ext. _____ Fax: _____ Email: _____

The lender requests their ELT Lien Code be activated on (YYYYMMDD): _____

The lender authorizes Dealertrack Registration and Titling Services (RTS) to assign, inquire and modify the 4-Alfa character Electronic Lien and Title (ELT) code for the lender.

The person signing represents that he or she is an authorized representative of Customer.

CUSTOMER AUTHORIZATION

 (Signature of Authorized Representative) (Date)

 (Printed Name) (Title)

To be completed by Dealertrack RTS (DO NOT WRITE IN THIS SPACE)	
Assigned ELT Lien Code: _____	
Reviewed / Entered By: _____	Date: _____

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