



MISSOURI DEPARTMENT OF REVENUE  
 MOTOR VEHICLE BUREAU  
 PO BOX 43, JEFFERSON CITY MO 65105-0043  
 (573) 751-8343 <http://dor.mo.gov/mvdl>

**APPLICATION FOR ONLINE ACCOUNT  
 (NOTICE OF LIEN FILING/RECORDS ACCESS/DIRECT DEBIT)**

FORM  
**5017**  
 (REV. 01-2009)

**SECTION A - APPLICATION/TRANSACTION TYPE - CHECK APPROPRIATE BOXES**

APPLICATION TYPE <input type="checkbox"/> NEW <input type="checkbox"/> CHANGE <input type="checkbox"/> CANCEL	TRANSACTION TYPE(S) REQUESTED <input type="checkbox"/> ONLINE NOTICE OF LIEN FILING <input type="checkbox"/> ONLINE RECORD ACCESS
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**SECTION B - BUSINESS AND CONTACT PERSON INFORMATION - PLEASE TYPE OR PRINT USING A BALL POINT PEN.  
 SEE INSTRUCTIONS ON REVERSE SIDE.**

BUSINESS			CONTACT PERSON		
NAME OF BUSINESS OR INDIVIDUAL			CONTACT PERSON'S NAME (LAST, FIRST, MIDDLE)		
IDENTIFICATION NUMBER SEE INSTRUCTIONS ON BACK			CONTACT PERSON'S ADDRESS (STREET, RR, OR PO BOX NUMBER)		
BUSINESS OR INDIVIDUAL'S ADDRESS (STREET, RR, OR PO BOX NUMBER)			CITY	STATE	ZIP CODE
CITY	STATE	ZIP CODE	E-MAIL ADDRESS		TELEPHONE NUMBER (    )
TYPE OF BUSINESS <input type="checkbox"/> BANK <input type="checkbox"/> TITLE LOAN <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> SAVINGS AND LOAN <input type="checkbox"/> CREDIT UNION <input type="checkbox"/> DEALER FILING AS LIENHOLDER <input type="checkbox"/> DEALER FILING FOR A LIENHOLDER <input type="checkbox"/> TOWER (NO CHARGE FOR ONLINE RECORD ACCESS - <b>DO NOT</b> COMPLETE SECTION C OR SECTION D) <input type="checkbox"/> OTHER _____			SECURITY ACCESS CODE (DPPA NUMBER) - COMPLETE IF APPLYING FOR ONLINE RECORD ACCESS. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		
					DEPARTMENT USE ONLY <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>

**SECTION C - ACCOUNT INFORMATION - COMPLETE ONLY IF NEW APPLICATION OR CHANGING ACCOUNT INFORMATION.**

FINANCIAL INSTITUTION NAME			TELEPHONE NUMBER (    )		
FINANCIAL INSTITUTION ADDRESS (STREET, RR, OR PO BOX NUMBER)					
CITY			STATE	ZIP CODE	
ACCOUNT TYPE - CHECK ONLY ONE BOX <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS <input type="checkbox"/> GENERAL LEDGER					
ROUTING NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>			DEPOSITOR (BUSINESS) ACCOUNT NUMBER <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		

**SECTION D - DIRECT DEBIT AUTHORIZATION - CHECK APPROPRIATE BOX.**

**A VOIDED CHECK OR DEPOSIT SLIP MUST BE ATTACHED.**

- I hereby **authorize** the Missouri Department of Revenue (Department) to initiate an electronic debit from the account identified above for payment of Notices of Liens processed and/or any records accessed online. I recognize that it is my responsibility to have the funds available in the account identified above for the withdrawal of my payment. I also understand that if the Department cannot deduct the payment from my account because funds are unavailable, I will be subject to overdraft fees from my financial institution. I will also be charged a dishonored payment penalty by the department. I further certify under penalties of perjury that I am authorized to sign this application and that any personal information obtained from any department records accessed will only be used as provided for in the federal Driver's Privacy Protection Act.
- I hereby **cancel** the authorization to electronically debit the account identified above.

SIGNATURE OF BUSINESS OWNER, PARTNER, CORPORATE OFFICER, OR INDIVIDUAL

PRINTED NAME OF BUSINESS OWNER, PARTNER, CORPORATE OFFICER, OR INDIVIDUAL

STAPLE VOIDED CHECK OR DEPOSIT SLIP HERE

**PLEASE READ THIS INFORMATION CAREFULLY**

**COMPLETION INSTRUCTIONS**

1. To apply for an online account to file Notices of Lien and/or access motor vehicle and marine records and have the payment for such transactions direct debited, complete this form as follows:

**General Instructions**

- Complete Sections A, B, C, and D if you are enrolling for the first time, re-enrolling after cancellation, changing your existing debit authorization, or other information. If you are a tower, **do not** complete Sections C and D when requesting online record access only.
- If you are cancelling your debit authorization, complete Sections A, B, and D only.

**Section A - Application/Transaction Type**

- Application Type - Check the appropriate box.
  1. New - Complete for new enrollment or re-enrollment after cancellation.
  2. Change - Complete to change type of account, financial institution or branch routing number, depositor (business) account number, or other information.
  3. Cancel - Complete to cancel your debit authorization.
- Transaction Type(s) Requested - Check the appropriate box(es).

**Section B - Business and Contact Person Information**

- Complete all blocks for both the business or individual and contact person information.
- Security Access Code - This code is issued by the Motor Vehicle Bureau to entities who qualify under the Driver's Privacy Protection Act to receive personal information contained in the department's vehicle and marine records. If you indicate you would like online record access in Section A - Transaction Type(s) Requested, you must enter the Security Access Code. If you do not have a Security Access Code, you may apply by completing a Request for MV/DL Record(s)/Security Access Code (DOR-4678). The application can be obtained from any local contract office.
- Identification Number - Please record the FDIC number (bank), NCUA number (credit union), Dealer number (licensed motor vehicle/boat dealer), FEIN (any other type of business), or SSN (individual) as the identification number. The last six blocks are for Department of Revenue use only.
- Type of Business - Check the appropriate box.

**Section C - Account Information**

- Financial Institution Information - Record the financial institution's name, telephone number, address, city, state, and zip code.
- Account Type - Check the appropriate box.
- Routing Number - Your financial institution's routing number is printed on the bottom left-hand portion of your business or personal checks or deposit tickets (the first 9 digits). See examples 1 and 2 below.
- Depositor (Business) Account Number - Your depositor account number is printed on the bottom of your business or personal checks following the routing number. It may be the first series of digits after the routing number followed by the check number (example 1), or it may be the series of digits which follow the check number (example 2). NOTE: Check number is not included in the depositor account number.

Example 1

XYZ BUSINESS		CHECK NO. 4444
HOMETOWN, USA		
PAY TO THE ORDER OF _____		
121456789	8765432109812	4444
Routing No.	Dep. Acct. No.	Ck. No.

Example 2

XYZ BUSINESS		CHECK NO.
HOMETOWN, USA		
PAY TO THE ORDER OF _____		
R121456789	4444	8765432109812
Routing No.	Ck. No.	Dep. Acct. No.

NOTE: Credit unions and savings and loan associations may differ from the above examples. Please verify your depositor account number and electronic routing number with your financial institution.

**Section D - Direct Debit Authorization**

- Check appropriate box. Attach a **voided** business or personal check or deposit slip to the front right-hand side of this application. This is necessary to verify the depositor account number, routing number, and financial institution.

2. Submit the completed application to the following address:

*MOTOR VEHICLE BUREAU  
PO BOX 43  
JEFFERSON CITY MO 65105-0043*

**CHANGE FINANCIAL INSTITUTION OR DEPOSITOR ACCOUNT INFORMATION**

Debits (withdrawals) will continue to be made from the designated account at your financial institution until the Missouri Department of Revenue is notified that you wish to redesignate your account and/or financial institution. To redesignate, complete and submit a new Application for Online Account (Notice of Lien Filing/Records Access/Direct Debit) with the new information.