



**AFFIDAVIT AND AGREEMENT
FOR ISSUANCE OF OUTDATED OR DUPLICATE WARRANT**

Reason for Request:

- Original warrant/check is Outdated (more than 6 months from the original warrant/check date)
- Original warrant/check was Not Received
- Original warrant/check is Lost
- Original warrant/check was Destroyed or Damaged
- Original warrant/check was Stolen

I, _____, being first duly sworn, say that I am named as the payee of the check numbered _____ dated _____ issued by the Iowa Department of Revenue of the State of Iowa in the amount of \$ _____. Neither I nor anyone on my behalf has deposited or cashed this check.

I request the original check to be stopped and a replacement check issued. Should the original check come into my possession, I will not attempt to cash it and will destroy it immediately.

The replacement check should be mailed to the following address:

NOTE: You must submit proof of current address if address listed below differs from driver's license or state-issued ID.

Payee Name

SSN/Tax ID Number

Address

City, State, Zip

Phone Number

Signature of Payee: _____ Date: _____

Signature of Spouse (if applicable): _____ Date: _____

You must wait a minimum of 14 days from the issue date of the check before a request can be submitted. You must return this form **AND** the required documentation listed below. Following our receipt of this information, allow 6 - 8 weeks to receive the replacement check.

Required Documentation:

Individuals:

- Copy of current driver's license or state-issued photo ID, and proof of current address, if applicable.
- If deceased: Copy of death certificate or Completed Affidavit of Administration.

Businesses:

- Proof of Federal ID Number.
- Proof of current address.

Mailing and Contact Information:

Fax to: 515-281-5830

Email to: IDREFT@iowa.gov

Mail to: Iowa Department of Revenue
PO Box 10413
Des Moines, IA 50306-0413

Phone: 800-367-3388/515-281-3114