

STATE OF INDIANA

Eric J. Holcomb, Governor

Peter L. Lacy, Commissioner

COURT ORDER

Title Application Checklist

If you are unable to establish ownership through any one of the available BMV title application processes, you must obtain a court order. Once you have received the court order, you may apply for a certificate of title through the BMV.

Applications for a certificate of title for a vehicle or watercraft using the court order process are processed by the BMV Central Office. Prior to submitting each application, verify that all required information is included. Contact (888) 692-6841 with any questions.

When submitting paperwork, include the following:

	Application fo 38529	or Certificate of Title for a Vehicle – State Form 205 or Application for a Certificate of Watercraft Title – State Form									
	issue a certific	The order must establish ownership, provide a description of the vehicle (year, make, VIN), direct the BMV to cate of title to the owner, and contain the signature of the judge and court seal or stamp. The order must be error s or altered orders will not be accepted.									
	<u>Physical Inspection of a Vehicle or Watercraft – State Form 39530</u> completed by law enforcement or an employee of a BMV license branch. If the VIN/HIN on the inspection does not match the VIN/HIN on the court order, a corrected court order will be required before the transaction can be processed.										
		sclosure Statement – State Form 43230. May be completed by the court appointed owner. All trailers and motor hing over 16,000 pounds are exempt.									
	Mobile Home	Permit – State Form 7878 (if a manufactured home). Must be completed by the County Treasurer.									
	correct. If the	address. A driver's license or identification card may be accepted as proof if the address on the credential is address is not correct, any document from the approved <u>BMV documentation list</u> that is dated within the last 60 used as proof. To view the approved documentation list, click on the link provided or visit myBMV.com									
		ent for the following vehicle or watercraft (as applicable) title application fees and taxes. Payable by MasterCard k, electronic check, or money order.									
	□ \$15	vehicle title application fee.									
	□ \$30	additional administrative penalty will be assessed if the title application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not received within 45 days after the file application packet is not receiv									
		speed title fee. This optional fee is in addition to the \$15 title application fee. Paying the optional speed title ensures that the title is processed in a period of time that is substantially shorter than the normal processing od.									
	□ If ve on t <u>Use</u>	chicle or watercraft is transferring ownership, include 7% sales tax of the dollar amount listed in the court order or the bill of sale/purchase agreement. If exempt from sales tax, include an <u>ST108E – Certificate of Gross Retail</u> <u>Tax or Exemption – State Form 48841</u> . If no information is available to determine the purchase price, and a bill ale is not attached, sales tax will assessed based on the NADA fair market value of the vehicle or watercraft.									
	Vehicle color	(List color on line)									
		, the required forms are included with this checklist. The forms are also available at									
myBM\	V.com. Mail the	completed packet to: Indiana Bureau of Motor Vehicles									
		Central Office Title Processing									

If the BMV determines that sufficient credible evidence exists to substantiate the applicant's claim of ownership, a title will be issued. <u>If all required documents are not submitted or information is incomplete the entire application will be returned.</u>

Indianapolis, IN 46204

100 North Senate Avenue, Room N411

Please include this checklist with your application.



APPLICATION FOR CERTIFICATE OF TITLE FOR A VEHICLE

State Form 205 (R9 / 7-16) Approved by State Board of Accounts, 2016 INDIANA BUREAU OF MOTOR VEHICLES

*This agency is requesting disclosure of your Social Security Number / Federal Identification Number in accordance with IC 4-1-8-1; disclosure is mandatory, and this record cannot be processed without it.

To be completed by a signee for out-of-state following vehicle and fi	ersonally e	xamined the	to indem	I swear and affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction.										
Year Make Inspector's Printed Name	Type City Branch, or E	Date (mm/d		correct. constitut Applicar Printed I Applicar Printed I	I swear and affirm that the information that I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury. Applicant Signature: Printed Name: Printed Name: Printed Name:									
Transaction Number				Branch N	umbor	Invoice N			V Use Only					
Transaction Number				Dialicity	umbei	IIIVOICEIV	umber	Bivi	v Ose Only	'ily				
Social Security Number / I	ntification	Number *	Name of	Applicant		BMV Use Only								
Residence Address (num	ber and str	eet)		.		City	City State ZIP Code							
Vehicle Identification Num	ber		Veh	icle Year	Vehicle Make		Vehicle Model	Veh	Vehicle Type Odometer					
Former Title Number			Pur	chase Date (r	nm/dd/yyyy)	Lien (Y/N)	Speed (Y/N)	Dealer Num	Dealer Number BMV Use Only					
Holder of First Lien, Mortg	age, or Oth	ner Encum	nbrance / Sp	ecial Mailing	Address	Mailing Addre	Mailing Address (number and street)							
City						ZIP Code		BMV Use Only						
Holder of Second Lien, Mortgage, or Other Encumbrance						Mailing Addre	Mailing Address (number and street)							
City	ZIP Code		License Num	ber	License Year	Forms Us	sed BMV	Use Only	Only					
Gross Retail and Use	Tax Affida	avit – I/W	e hereby	certify that s	ales or use ta	ax on this veh	icle was paid a	s indicated	below.					
Selling Price	Less Trac	de-In / Dis	count	Amount Su	bject to Tax	Amount of Ta	х	Dealer	Branch	Exempt	Exemption Code			
\$	\$			\$										

INSTRUCTIONS: Use the following instructions to assist with completion of the application.

Sign and date on top right signature line.

- Line 1: BMV use only
- $\label{limited-limit} \mbox{Line 2: Enter the name} (s) \mbox{ and Social Security Number or Federal Identification Number of the owner} (s).$
- Line 3: Enter the residence address of the owner(s).
- Line 4: Enter the VIN, Year, Make, Model, Odometer (if applicable), and Vehicle Type (examples include: 2S (2 door sedan), 4S (4 door sedan), CN (convertible), CP (coupe), 2W (2 door wagon), 4W (4 door wagon), VA (van), TK (truck), MC (motorcycle), TR (trailer), SE (semitrailer), TC (semi tractor), RV (recreational vehicle, including motor home and travel trailer), MH (manufactured/mobile home), AT (all-terrain), and LS (low speed).
- Line 5: Enter former title number and purchase date, and indicate if there is a lien by entering Y (yes) or N (no). If a speed title is requested, enter Y (yes) and include an additional \$25 with the application.
- Line 6 9: Indicate lienholder name(s) and mailing address. If there is no lien, and you wish to have the title mailed to an address other than your current mailing address, enter a special mailing address on lines 6 and 7. Enter dealer license information (if applicable).
- Line 10: Not required to be completed. However, appropriate tax form or payment must be included with the title application.



APPLICATION FOR CERTIFICATE OF WATERCRAFT TITLE

State Form 38529 (R7 / 7-16) Approved by State Board of Accounts, 2016 INDIANA BUREAU OF MOTOR VEHICLES

*This agency is requesting disclosure of your Social Security Number / Federal Identification Number in accordance with IC 4-1-8-1; disclosure is mandatory, and this record cannot be processed without it.

signee	for out-of-s	tate titles.	I hereby	BMV official, or Ecertify that I perdification number	sonal	ly examined the	I swear and affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction. I swear and affirm that the information that I have entered on this form is						
Hull Ide	ntification Nu	mber					correct. I understand that making a false statement on this form may						
							constitute the crime of perjury.						
Year	Make		Registrat	ion Number		Date (mm/dd/yyyy)	Applicant Signature:						
							Printed Name:						
Inspecto	or's Printed N	lame and T	ïtle	City			Applicant Signature:						
Inspecto	or's Signature)		Badge, Branch	n, or De	ealer Plate Number	Printed Name:						
							Date (mm/dd/yyyy):						
Transac	tion Number			Branch Number	er	Invoice Number	BMV Use Only						
Registration Number Former Title Number							Purchase Date (mm/dd/yyyy) Make						
Series or Model Hull Identification						mber	Length	Year		Hull Type			
Watercraft Type Watercraft Use							Propulsion Type Fuel Type						
Social S	Security Num	ber / Feder	al Identifica	tion Number *		Horsepower	Applicant's County of Residence						
Name o	f Applicant						Street Address (number and	d street)					
City							State ZIP Code						
Holder	of First Lien, I	Mortgage, o	or Other En	cumbrance / Spec	ial Mai	iling Address	Mailing Address (number and street)						
City						State	ZIP Code BMV Use Only						
Holder	of Second Lie	n Mortgag	e or Other	Encumbrance			Mailing Address (number and street)						
Holder of Second Lien, Mortgage, or Other Encumbrance							Mailing Address (number and street)						
City						State	ZIP Code	Dealer	Number				
	D . "			1001			<u> </u>						
Gross Selling F		∪se Fax A		I/We hereby cer de-In / Discount		at sales or use tax or ount Subject to Tax	on this watercraft was paid as indicated below. Amount of Tax Dealer Branch Exempt Exemption Code						
e Selling i	1.00		e	20 III/ DISCOUNT	¢	Jan Gubjeet to Tax	e e	Deale	Dianon	Lagilipt	Zampilon oode		
*													



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R5 / 12-11) Approved by State Board of Accounts, 2011 INDIANA BUREAU OF MOTOR VEHICLES

INSTRUCTIONS:

- 1. Approved inspector must complete information in blue or black ink or print form.
- 2. The vehicle identification number (VIN) or hull identification number (HIN) must be inspected to verify the existence and condition of the number. An ownership document is not required to be submitted for inspection.
- 3. Inspections may be performed by an employee of a dealer designated by the Indiana Secretary of State, a military policeman assigned to a military post in Indiana, a police officer, or a designated employee of a BMV full or partial service license branch.
- 4. Police officers completing this form may not charge a fee of more than \$5.00 for vehicles. No fee may be collected for watercraft inspections. Authorized Indiana dealers and BMV full or partial service license branches may not assess a fee.
- 5. Dealers may not perform watercraft inspections.

OWNER INFORMATION																				
Name (la	ast, first, n	niddle initial d	or company	name																
	/ /	1 (1)																		
Address	(number a	and street)																		
City															State	Э		ZIP	Code	
VEHICLE OR WATERCRAFT INFORMATION																				
Identification Number NONE (select if no identification number											number f	ound)								
				<u> </u>																
Year		Make		Mo	odel			Туре			Plate No	umber	/ Stat	е			Watercra Number,		gistration olicable	
	For assembled vehicles or watercraft include serial numbers for major component parts if present: Engine / Motor Transmission																			
Lingine	WOO								IIIai	13111331011										
Body Ch	assis								Fror	nt Assemb	ly									
Rear Clip	р						Frame													
Other (s)	necify):																			
Other (3)	pecny).																			
*IDAC	S / NCI	C Check	(required	l if form	is comple	eted by a	police	e office	er)											
Date Ch	eck Perfor	med (mm/dd	/уууу)	Comme	nts															
I swear or affirm that the information I have entered on this form is correct. I understand making a false statement may constitute the crime of perjury.																				
Signatur	e of Inspe	ctor				Printed	Name					Title						D	ate (mm/c	dd/yyyy)
Badge /	Branch / D	Dealer Numb	er			Police	Departm	nent / Br	ranch/	Dealership	0	(City					ZI	IP Code	
Telepho	ne Numbe	er				Email A	Address													
(



ODOMETER DISCLOSURE STATEMENT

State Form 43230 (R3 / 5-13) INDIANA BUREAU OF MOTOR VEHICLES

- INSTRUCTIONS: 1. In accordance with federal and state law, the seller of a motor vehicle must disclose the current mileage to a purchaser in writing upon transfer of ownership. The disclosure must be signed by the seller, including the printed name. If more than one person is a seller, only one seller is required to sign the written disclosure.
 - The purchaser must sign the disclosure statement, including printed name and address, and return a copy to the seller.
 - 3. Complete this form in its entirety, in blue or black ink.

Federal and State law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines, imprisonment, or both.											
I,			residing at:								
Printed name(s) of Seller(s)											
certify to the best of my knowledge that the											
Address of Seller(s) (number and street, city, state, and ZIP code)											
odometer reading is the actual mileage of the vehicle described below unless one of the following statements is checked:											
Miles (no tenths) 1. I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.											
I hereby certify that the odometer reading is NOT the actual mileage and should not be relied upo WARNING - ODOMETER DISCREPANCY.											
Vehicle Make Vehicle Model Vehicle Year		Vehicle Body Type									
Vehicle Identification Number (VIN)		Transfer Date (month, day, year)									
I will not hold the Bureau of Motor Vehicles or the Bureau of Motor Vehicles Commission responsible for any discrepancy shown on the odometer reading. I, the undersigned, swear or affirm that the information entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.											
Signature(s) of Seller(s)	Date (month, day, year)										
PURCHASER'S INFORMATION											
I am aware of and acknowledge the above odometer certification made by the sel	ller(s).										
Signature(s) of Purchaser(s)	Date (mont	h, day, year)									
Printed Name(s) of Purchaser(s)											
Address of Purchaser(s) (number and street)											
City	State		ZIP Code								



COLLECTION OF PAYMENT INFORMATION

State Form 56163 (7-17) Approved by State Board of Accounts, 2017 INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES

Central Office Finance 100 N. Senate Avenue, Room N440 Indianapolis, IN 46204 (888) 692-6841

INSTRUCTIONS:

- 1. Complete in blue or black ink, or print form.
- 2. Enter the amount to be charged and the payment type information in Section 2. Payment may be made by Visa, MasterCard, or electronic check. If enclosing a check, money order, cashier's check, or certified check, this form is not required.
- 3. Mail this form to the address that is specified on the application being submitted and for which you are making payment.
- 4. This form will be destroyed immediately after payment has been processed.

SECTION 1 - ACCOUNT HOLDER INFORMATION										
Name of Account Holder (first, middle, last, or company name)		Driver's License Number (DLN) Identification Number	Telephone Number							
Billing Address (number and street)		City	State	ZIP Code						
SEC	CTION 2 -	PAYMENT INFORMATION								
Amount to be Charged: \$	Description	on of the service/application to whi	ch the payment is relat	ted:						
Credit Card Payment:										
Type of Credit Card:										
Credit Card Number:		Expiration Date (mm/yy): /								
Electronic Check Payment:										
Routing Number:										
Account Number:										
SECTION 4 - AFFIRMATION STATEMENT										
I hereby authorize the Indiana Bureau of Motor Vehicles to charge the credit card or the electronic check information in the amount provided above.										
Signature of Account Holder / Authorized User	Printed	Name	Date Signed (mm/dd/yyyy)							