



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 for Certificate of Title for a Vehicle – State Form 205](#) or [Application for a Certificate of Watercraft Title – State Form 38529](#)
- ☐ Court Order. The order must establish ownership, provide a description of the vehicle (year, make, VIN), direct the BMV to issue a certificate of title to the owner, and contain the signature of the judge and court seal or stamp. The order must be error free. Erasures or altered orders will not be accepted.
- ☐ [Physical Inspection of a Vehicle or Watercraft – State Form 39530](#) 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.
- ☐ [Odometer Disclosure Statement – State Form 43230](#). May be completed by the court appointed owner. All trailers and motor vehicles weighing over 16,000 pounds are exempt.
- ☐ [Mobile Home Permit – State Form 7878](#) (if a manufactured home). Must be completed by the County Treasurer.
- ☐ One proof of address. A driver's license or identification card may be accepted as proof if the address on the credential is correct. If the address is not correct, any document from the approved [BMV documentation list](#) that is dated within the last 60 days may be used as proof. To view the approved documentation list, click on the link provided or visit myBMV.com
- ☐ Submit payment for the following vehicle or watercraft (as applicable) title application fees and taxes. Payable by MasterCard or Visa, check, 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 stamp date on the court order.
 - ☐ \$25 speed title fee. This optional fee is in addition to the \$15 title application fee. Paying the optional speed title fee ensures that the title is processed in a period of time that is substantially shorter than the normal processing period.
 - ☐ If vehicle or watercraft is transferring ownership, include 7% sales tax of the dollar amount listed in the court order or on the bill of sale/purchase agreement. If exempt from sales tax, include an [ST108E – Certificate of Gross Retail Use Tax or Exemption – State Form 48841](#). If no information is available to determine the purchase price, and a bill of sale is not attached, sales tax will be assessed based on the NADA fair market value of the vehicle or watercraft.
- ☐ Vehicle color _____ (List color on line)

For your convenience, the required forms are included with this checklist. The forms are also available at myBMV.com. Mail the completed packet to:

**Indiana Bureau of Motor Vehicles
Central Office Title Processing
100 North Senate Avenue, Room N411
Indianapolis, IN 46204**

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

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 police officer, BMV official, or BMV certified dealer signee for out-of-state titles. I hereby certify that I personally examined the following vehicle and find the identification number to be as follows.				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.						
Vehicle Identification Number 				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.						
Year	Make	Model	Type	Date (mm/dd/yyyy)						
Inspector's Printed Name and Title			City							
Inspector's Signature		Badge, Branch, or Dealer Plate Number								
Transaction Number				Branch Number		Invoice Number		BMV Use Only		
Social Security Number / Federal Identification Number *				Name of Applicant					BMV Use Only	
Residence Address (number and street)					City			State	ZIP Code	
Vehicle Identification Number			Vehicle Year	Vehicle Make		Vehicle Model		Vehicle Type	Odometer	
Former Title Number			Purchase Date (mm/dd/yyyy)		Lien (Y/N)	Speed (Y/N)	Dealer Number	BMV Use Only		
Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address					Mailing Address (number and street)					
City			State	ZIP Code		BMV Use Only				
Holder of Second Lien, Mortgage, or Other Encumbrance					Mailing Address (number and street)					
City		State	ZIP Code	License Number		License Year	Forms Used	BMV Use Only		
Gross Retail and Use Tax Affidavit – I/We hereby certify that sales or use tax on this vehicle was paid as indicated below.										
Selling Price	Less Trade-In / Discount		Amount Subject to Tax		Amount of Tax		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

Line 2: Enter the name(s) 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.

To be completed by a police officer, BMV official, or BMV certified dealer signee for out-of-state titles. I hereby certify that I personally examined the following watercraft and find the identification number to be as follows.				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.			
Hull Identification Number 				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.			
Year	Make	Registration Number	Date (mm/dd/yyyy)	Applicant Signature: _____			
Inspector's Printed Name and Title		City		Printed Name: _____			
Inspector's Signature		Badge, Branch, or Dealer Plate Number		Applicant Signature: _____			
				Printed Name: _____			
				Date (mm/dd/yyyy): _____			
Transaction Number		Branch Number	Invoice Number	BMV Use Only			
Registration Number		Former Title Number		Purchase Date (mm/dd/yyyy)		Make	
Series or Model		Hull Identification Number		Length	Year	Hull Type	
Watercraft Type		Watercraft Use		Propulsion Type		Fuel Type	
Social Security Number / Federal Identification Number *			Horsepower	Applicant's County of Residence			
Name of Applicant				Street Address (number and street)			
City				State	ZIP Code		
Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address				Mailing Address (number and street)			
City			State	ZIP Code		BMV Use Only	
Holder of Second Lien, Mortgage, or Other Encumbrance				Mailing Address (number and street)			
City			State	ZIP Code		Dealer Number	
Gross Retail and Use Tax Affidavit – I/We hereby certify that sales or use tax on this watercraft was paid as indicated below.							
Selling Price	Less Trade-In / Discount	Amount Subject to Tax	Amount of Tax	Dealer	Branch	Exempt	Exemption Code
\$	\$	\$	\$				



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R6 / 11-17)

BUREAU OF MOTOR VEHICLES
100 N. Senate Avenue, Room N440
Indianapolis, IN 46204
(888) 692-6841
www.bmv.in.gov

- 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 licensed under IC 9-32, a military policeman assigned to a military post in Indiana, a police officer, a designated employee of a BMV license branch, or a designated employee of a BMV full or partial service provider.
 4. Police officers completing this form may charge a fee of not more than \$5.00 for this inspection under IC 9-17-2-12. This fee is not collected by the Bureau of Motor Vehicles and should not be submitted with this form. The police officer completing this form will advise the Owner of the amount of the fee, if any, and the method by which it should be paid.

OWNER INFORMATION

Name (last, first, middle initial or company name)

Address (number and street)

City

State

ZIP Code

VEHICLE OR WATERCRAFT INFORMATION

Identification Number

☐ **NONE** (Select if no identification number found.)

Year	Make	Model	Type	Plate Number / State	Watercraft Registration Number, if applicable											

For assembled vehicles or watercraft include serial numbers for major component parts if present:

Engine / Motor	Transmission
Body Chassis	Front Assembly
Rear Clip	Frame
Other (specify):	

*IDACS / NCIC Check (required if form is completed by a police officer)

Date Check Performed (mm/dd/yyyy)	Comments

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.

Signature of Inspector	Printed Name	Title	Date (mm/dd/yyyy)
Badge / Branch / Dealer Number	Police Department / Branch / Dealership	City	ZIP Code
Telephone Number ()	Email 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.
 2. 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.
- ☐ 2. I hereby certify that the odometer reading is NOT the actual mileage and should not be relied upon.
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 seller(s).

Signature(s) of Purchaser(s)

Date (month, 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) or Federal Identification Number	Telephone Number	
Billing Address (number and street)	City	State	ZIP Code

SECTION 2 - PAYMENT INFORMATION

Amount to be Charged: \$ _____ . _____	Description of the service/application to which the payment is related:
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Credit Card Payment:

Type of Credit Card:	<input type="checkbox"/> Visa	<input type="checkbox"/> MasterCard
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)