OR	COMPLETED BY A POLICE OUT OF STATE TITLES. OWING VEHICLE AND FI	I HEREE ND THE	IDENTIFIC	Y TH	IAT I PEI	RSONAL	LY E	XAMINED 1	THE	INFORM UNDER	/ATIC	ON D TH	ENTE	ERED OF	N TH	IS FOR	M IS CO	M THAT TH DRRECT. I/W DN THIS FOR		
EHIC	CLE IDENTIFICATION	NUMBE ¦	R 	1	-					AGREE	TO II	NDE	MNIF'	Y AND H	OLD	HARML	ESS THE	ERMORE, I/W INDIANA BM RANSACTIOI		
EAR	MAKE MODEL T			TYP	11 <u>i</u> PE	DAT	TE (m	onth, day, j	h, day, year) X											
NSPECTOR'S PRINTED NAME AND TITLE				(CITY					DATE (month, day, year):										
NSPECTOR'S SIGNATURE					BADGE, E DEALER			liens must	hicle. Then be releas	The law requires that you apply for Certificate of Title within thirty-one (31) days from the date of pin. There is a delinquent fee for failure to do so. Attach Certificate of Title assigned by seller. On endor released. Supporting documents surrendered with this application cannot be returned to the with Federal Code 383.										
1.	TITLE NUMBER BRANCH N				INVOIC	CE NO.	BM\	/ USE ONI	JSE ONLY											
2.	*SOC. SEC./FEDERAL I.I	APF	PPLICANT					BMV USE ONLY							.Y					
3.	STREET ADDRESS (num		CITY					STATE ZIP COL						CODE	DE					
4.	VEHICLE I.D. NUMBER				VEH.YEAR VEH. MAKE VEH					H. MODEL NO. VEH. TYPE ODOMETER										
5.	FORMER TITLE NUMBER PURCHASE			SE D	DATE LIEN			SPEE	PICK	UP	MAIL		DEALER NO. BMV USE ONLY							
6.	FIRST LIEN'S NAME OR			STREET ADDRESS (number and street)																
7.	CITY				TE ZIP CODE					BMV USE ONLY										
8.	SECOND LIEN'S NAME							STREET ADDRESS (number and street)												
9.	CITY			ATE	TE ZIP CODE			LICENSE		NUMBE		LICENSE FO YEAR		FORMS U	USED BMV U		SE ONLY			
	GROSS RETAIL AND USE TAX AFFIDAVIT - I/WE HEREBY CERTIFY THAT SAL										E TAX	ON T	HIS V	 EHICLE W	/AS P	AID AS II	NDICATED	BELOW.		
10.	\$ \$				DE-IN * AMOUNT			SUBJECT	Г ТО ТАХ	AX AMOUNT OF TAX			DEALER	ВІ	RANCH	EXEMPT	IF EXEMPT PLACE PARA.			
	*Your Social Security numb	er / Fede	eral I.D. nun	ber	is being ı	equeste	ed by t	this agency	under IC	4-1-8-1.	Disclo	sure is	s mano	datory and t	his do	cument ca	annot be pro	ocessed without		

APPLICANT IS RESPONSIBLE FOR ACCURACY OF INFORMATION.

APPLICATION FOR CERTIFICATE OF TITLE • STATE OF INDIANA • BUREAU OF MOTOR VEHICLES

BUREAU - TO BE MAILED WITH TITLE REPORT