



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 the 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 you are transferring ownership of the vehicle or watercraft, include 7% sales tax of the dollar amount listed in the court order or on the bill of sale/purchase agreement. If you are exempt from paying sales tax, include [ST108E – Certificate of Gross Retail Use Tax or Exemption – State Form 48841](#).
 - If no information is available to determine the purchase price, include a bill of sale or [State Form 56620 -Affidavit of Missing Title Information](#) with the purchase price listed or sales tax will assessed based on the NADA fair market value of the vehicle or watercraft.
- Vehicle color _____ (List color on line)
- Vehicle fuel type (select one):
 - Gasoline
 - Diesel
 - Hybrid
 - Electric
 - Other

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 (R10 / 11-18)
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 or 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 or 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/yy)	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
\$	\$		\$	\$					



APPLICATION FOR CERTIFICATE OF WATERCRAFT TITLE

State Form 38529 (R8 / 11-18)
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 or 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 or 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
\$	\$	\$	\$				



AFFIDAVIT OF MISSING TITLE INFORMATION

State Form 56620 (4-19)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES
100 N. Senate Avenue, Rm N411
Indianapolis, IN 46204
(888) 692-6841
www.bmv.in.gov

INSTRUCTIONS:

1. Complete in blue or black ink or print form. Copies may be accepted.
2. Use the form below to report information that is missing on a certificate of title or vehicle bill of sale in cases where purchaser cannot return to the seller to obtain it. This form may only be used if the seller is not a licensed car dealer.
3. The BMV reserves the right to forward all completed forms to Indiana Department of Revenue for review. The Indiana Department of Revenue may collect additional taxes.

SECTION 1 - AFFIRMATION OF PURCHASER(S)														
Purchaser(s) Name <i>(individual or company name)</i>														
VEHICLE IDENTIFICATION NUMBER or HULL IDENTIFICATION NUMBER														
Year					Make					Model				
The following information was missing on the certificate of title or bill of sale for the vehicle indicated above. I hereby request that the Indiana Bureau of Motor Vehicles uses the information provided below.														
<input type="checkbox"/> Date of Sale is missing.							<input type="checkbox"/> Selling Price is missing.							
The correct Date of Sale is: _____ <i>(mm/dd/yyyy)</i>							The correct Selling Price is: \$ _____.							
SIGNATURE														
I swear or affirm that the information entered on this form is true and correct. I understand that making a false statement may constitute the crime of perjury. I agree to indemnify and hold harmless the Indiana Bureau of Motor Vehicles from any liability arising from this transaction.														
Purchaser Signature					Printed Name					Date <i>(mm/dd/yyyy)</i>				



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R8 / 6-21)
INDIANA BUREAU OF MOTOR VEHICLES

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 the BMV, an employee of a qualified person operating under a contract with the commission, or an employee of a dealer that is licensed as a motor vehicle dealer in a state other than Indiana and approved by the bureau.
 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.

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	State	ZIP Code
Telephone Number ()	E-mail			



COLLECTION OF PAYMENT INFORMATION

State Form 56163 (R2 / 6-19)
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, Discover, American Express, 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				
Account Holder (first, middle, last name or company name)		Driver's License Number 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		
CREDIT CARD PAYMENT				
Type of Credit Card: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> Discover <input type="checkbox"/> American Express				
Credit Card Number: _____ - _____ - _____ - _____			Expiration Date (mm/yy): ____ / ____	
ELECTRONIC CHECK PAYMENT				
Routing Number				
Account Number				
SECTION 3 - AFFIRMATION STATEMENT				
I hereby authorize the Indiana Bureau of Motor Vehicles to charge the account indicated above.				
Signature of Account Holder / Authorized User		Printed Name		Date Signed (mm/dd/yyyy)