## APPLICATION FOR CERTIFICATE OF WATERCRAFT TITLE

State Form 38529 (R10 / 10-21)
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.
* This agency is requesting disclosure of your Driver's License Number and Date of Birth in accordance with 33 CFR 174.17; disclosure is mandatory, and this record cannot be processed without it.


