

Form INBPR-C State Form 55395 (R / 7-18)

State of Indiana Base Plate Registration TRANSACTION SCHEDULE C

	Please refer to the back for Line by Line Instructions.								7. Mailing Address Change								13. BPR Account Number					15. License Year			
SECTION 1																							Current		
	1. Legal Name								8. County 9. City							14. Fleet Number						Upcoming			
	2. Business Address Change 3. County							10. State		11. Zip Code				16. Staggered Month											
	4. City 5. State 6. Zip Code						12. Contact Name Change				17. Phone Nun			nber Change 18. Ta				axpayer Identification Number							
	1 2 3				4		5	5 6		7 8		9 1		0		12	2 13		14		15			16	
2	Unit	Unit Year M			Vehicle Identificati Number		Туре	Axles or Seats	MCS USDOT Number	Fuel	Unladen Weight	Gr	Gross C Weight		eclared mbined Gross /eight	Purch Pric		Factory Price	Purchase Date		Owner			County	
SECTION																									
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	1	2	3			4		5			6	7					8			9			10		
	Uni Numb		⁄ear	Vehicle Make			Vehicle Identification Number			Unladen Weight		Declared Gross Weight		Declared Combined Gross Weight		Owner				License F Numb					
N 3																									
TIC					_																				
SECTION																									
4	To designate a Transaction Type, place an X in the appropriate box.																								
SECTION	Account Business Address Change Contact Name Change Fleet Mailing Address Change Replacement License Plate Account Mailing Address Change Contact Telephone Number Change Owner Name Change Vehicle Deletion Additional Vehicle Vehicle Identification Correction License PlateTransfer Weight Increase Carrier Type Change Fleet Business Address Change Legal Name Change Others																								

Schedule C Instructions

Section 1

Line 1: Enter the legal name as it is registered with the Indiana Secretary of State or the Indiana Department of Revenue. (The BPR Unit will register the registrant/applicant in the same name as registered with the Indiana Secretary of State or Indiana Department of Revenue.)

Lines 2 through 6: Enter the business address change for an account or fleet. Be certain to designate the appropriate change in Section 4, transactions types. (To be completed for changes only.)

Lines 7 through 11: Enter the mailing address change for an account or fleet. Be certain to designate the appropriate change in Section 5, transactions types. (To be completed for changes only.)

Lines 12 and 17: Enter the name of the new contact person and contact person telephone number. Be certain to designate the appropriate change in Section 4, transaction types. (To be completed for changes only.)

Line 13: Enter the account number.

Line 14: Enter the fleet number.

Line 15: Enter an X in the appropriate license year for the transaction type. If both boxes are marked with an X, then the transaction will be processed for the current registration year and the next registration year.

Line 16: Enter the staggered month associated with your account.

Line 17: Enter the telephone number change.

Line 18: Enter the taxpayer identification number of the applicant. All business entities must register with the Indiana Department of Revenue and obtain a taxpayer identification number.

Section 2

Column 1: Enter the registrant assigned unit number or equipment number for the vehicle.

Column 2: Enter the last two digits of the model year of the vehicle.

Column 3: Enter the vehicle make using the three letter abbreviation that is shown on the vehicle title or title application.

Column 4: Enter the entire Vehicle Identification Number (VIN) as shown on the certificate of title or title application.

Column 5: Enter the type of vehicle. Vehicle Types: TK-Truck (single), TR-Tractor, TT-Truck Tractor, RT-Road Tractor, ST-Semi-Trailer, FT-Full Trailer, WR-Wrecker. (Use only the abbreviation.) For a complete description and illustration, please refer to the BPR manual. Enter "1ST" for one-year Semi-Trailer, "5ST" for five-year Semi-Trailer plate or "PST" for Permanent Semi-Trailer plate.

Column 6: Enter the number of axles, including axles used in a tandem group.

Column 7: Enter the Motor Carrier USDOT Number of the entity responsible for the vehicle safety fitness. If the registrant is a lessee, the responsible party will be determined via a lease agreement.

Column 8: Enter the fuel type. Fuel types are as follows: CNG-Compressed Natural Gas, D- Diesel, E- Electric, G-Gasoline, H-Hybrid, LNG- Liquid Natural Gas, P-Propane, and O-Other

Column 9: Enter the weight of the vehicle fully equipped for service excluding the weight of any load.

Column 10: Enter the total unladen weight of the vehicle plus the maximum load to be carried on the vehicle.

Column 11: Enter the total unladen weight of the combination of vehicles plus the maximum load to be carried on that combination of vehicles.

Column 12: Enter the actual purchase price of the vehicle paid by the current owner, excluding trade in and the sales tax, including accessories or modifications attached to the vehicle.

Column 13: Enter the manufacturer's retail price, excluding trade in and the sales tax, including accessories or modifications attached to the vehicle.

Column 14: Enter the month, day and year the vehicle was purchased by the current owner.

Column 15: Enter the name of the titled owner, if the vehicle is not owned by the Applicant.

Column 16: Enter the Indiana county for each vehicle.

Section 3

If the transaction type is an apportioned license plate transfer, the license plate will be transferred, in the order they are listed in Section 3, to the vehicles listed in Section 2.

- Column 1: See Section 2, Column 1 instruction.
- Column 2: See Section 2, Column 2 instruction.
- Column 3: See Section 2, Column 3 instruction.
- Column 4: See Section 2, Column 4 instruction.
- Column 5: See Section 2, Column 8 instruction.
- Column 6: See Section 2, Column 9 instruction.
- Column 7: See Section 2, Column 10 instruction.
- Column 8: See Section 2, Column 14 instruction.
- **Column 9:** Enter the apportioned license plate number that is to be transferred or returned to the BPR Unit.
- **Column 10:** Enter the unit number of the vehicle replacing the deleted vehicle.

Section 4

Place an X in the box to designate the transaction type to be processed.