



# APPLICATION FOR REPLACEMENT DEALER LICENSE PLATE OR REGISTRATION

State Form 55616 (R5 / 5-17)

**INDIANA SECRETARY OF STATE  
 AUTO DEALER SERVICES DIVISION**  
 302 West Washington Street Room E-018  
 Indianapolis, IN 46204  
 Fax: (317) 233-1915  
[Dealers@sos.in.gov](mailto:Dealers@sos.in.gov)

- INSTRUCTIONS:**
1. Complete in blue or black ink or print completed form.
  2. Submit the completed form to the Auto Dealer Services Division by mail, fax, hand delivery, or scan and e-mail.
  3. Lost or stolen dealer license plates must be reported to law enforcement and Section 2 must be completed by that law enforcement agency.
  4. Damaged dealer license plates must be returned to the Auto Dealer Services Division before a replacement dealer license plate may be issued.
  5. The replacement dealer license plate or registration will become the current and only valid plate once issued. If found, the lost or stolen dealer license plate is not valid.
  6. A separate form must be completed for each dealer license plate or registration that is lost, stolen, damaged (illegible), or destroyed.

### DEALER INFORMATION

Name of Dealer		Dealer Number	
Address of Established Place of Business (number and street)		City	State
		ZIP Code	
Telephone Number (      )		County	

### DEALER LICENSE PLATE INFORMATION

Affected License Plate Number	Affected License Plate Type
	<input type="checkbox"/> Dealer - New <input type="checkbox"/> Motorcycle Dealer - New <input type="checkbox"/> Dealer - Used <input type="checkbox"/> Motorcycle Dealer - Used <input type="checkbox"/> Interim License Plate <input type="checkbox"/> Motorcycle Interim License Plate <input type="checkbox"/> Transfer Dealer <input type="checkbox"/> MDC A <input type="checkbox"/> MDC B <input type="checkbox"/> Manufacturer <input type="checkbox"/> Watercraft Dealer <input type="checkbox"/> Watercraft Interim License Plate <input type="checkbox"/> Manufacturer Subcomponent (R&D)
The Plate Described Above Has Been	
<input type="checkbox"/> Lost <input type="checkbox"/> Stolen <input type="checkbox"/> Damaged (Illegible) or Destroyed	
The Plate Described Above Is Dealer Designee?	
<input type="checkbox"/> Yes <input type="checkbox"/> No	
Plate or Document Requested	
<input type="checkbox"/> Dealer License Plate <input type="checkbox"/> Watercraft Dealer License Plate <input type="checkbox"/> Registration <input type="checkbox"/> Registration with Sticker	

### LAW ENFORCEMENT CERTIFICATION

Law Enforcement Agency	Name of Law Enforcement Officer	Badge Number
License Plate Number	Date Reported Lost or Stolen (mm/dd/yyyy)	
I swear or affirm that the above described dealer license plate has been reported to this law enforcement agency as lost or stolen, and that the information I have entered on this form is true and correct. I understand that making a false statement may constitute the crime of perjury.		
Law Enforcement Officer Signature	Date Signed (mm/dd/yyyy)	

### DEALER AFFIRMATION

I hereby certify, under the penalty of perjury, that I am authorized to make this application and that the answers and information contained in this application are true and correct.	
Signature of Owner, Officer, Partner, or Authorized Representative	Date Signed (mm/dd/yyyy)