

## MOTOR DRIVEN CYCLE (MDC) AFFIDAVIT AFFIRMATION OF OWNERSHIP AND/OR CUBIC CENTIMETERS (CC)

State Form 55714 (R3 / 8-24) INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-17; IC 9-13-2-104 and IC 9-17-1-1.

\* This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1. Disclosure is voluntary and you will not be penalized for refusal.

## **INSTRUCTIONS:**

- 1. Complete in blue or black ink or print form.
- An applicant must complete this form to apply for an Indiana Certificate of Registration for a motor driven cycle if proof of ownership cannot be provided or when the cubic centimeters cannot be determined by a Manufacturer's Certificate of Origin or through the bureau's VIN decoding system.
- 3. When this form is completed to affirm ownership and there is more than one owner, all owners must sign this affidavit.

SECTION 1: OWNER INFORMATION																		
Name	of Ow	ner(s)															ecurity Number <i>(last 4)</i> or Federal ion Number	
Legal	Addres	s (num	ber and	d street)	)					City	,				Sta	te	ZIP Code	
																IN		
							SI	ECTIO	N 2:	VEHI	CLE IN	IFORM	OITAN	N				
Vehicle Identification Number (VIN):																		
																	Purchase Date (mm/dd/yyyy)	
Year			Make	) }	ı	ı					Model					Purchase Price (for title only)		
S									ON 3:	OWN								
A <b>Motor Driven Cycle (MDC)</b> , as defined in <a href="LC 9-13-2-104.1">LC 9-13-2-104.1</a> , is a motor vehicle that: <ul> <li>(1) has a seat or saddle for the use of the rider;</li> <li>(2) is designed to travel on no more than three (3) wheels on the ground;</li> <li>(3) complies with applicable motor vehicle equipment requirements under <a href="LC 9-19">LC 9-19</a> and 49 CFR 571; and <ul></ul></li></ul>																		
I swear or affirm under the penalty of perjury that I am the legal owner of this motor driven cycle, that there are no other claims of ownership, and that this vehicle meets the definition of a motor driven cycle. I agree to indemnify and hold harmless the Indiana Bureau of Motor Vehicles from any liability arising from this transaction.																		
Signature of Owner							Prir	Printed name and Position (agent, trustee, etc., if applicable)									Date Signed (mm/dd/yyyy)	
Signature of Owner							Prir	Printed name and Position (agent, trustee, etc., if applicable)								Date Signed (mm/dd/yyyy)		
BMV USE ONLY																		
Branch Name and Number								it ID	DI	11 V U O 1						ate Processed (mm/dd/yyyy)		
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