



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

State Form 55714 (R2 / 1-22)
Indiana Bureau of Motor Vehicles

* 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.
 2. 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 Owner(s)										* Social Security Number (last 4) or Federal Identification Number			
Legal Address (number and street)						City			State	ZIP Code			
									IN				
SECTION 2: VEHICLE INFORMATION													
Vehicle Identification Number (VIN):													
													Purchase Date (mm/dd/yyyy)
Year		Make				Model				Purchase Price (for title only)			
SECTION 3: OWNER AFFIRMATION													
<p>A Motor Driven Cycle (MDC), as defined in IC 9-13-2-104.1, is a motor vehicle that:</p> <ul style="list-style-type: none"> (1) has a seat or saddle for the use of the rider; (2) is designed to travel on no more than three (3) wheels on the ground; (3) complies with applicable motor vehicle equipment requirements under IC 9-19 and 49 CFR 571; and (4) has a cylinder capacity not exceeding fifty (50) cubic centimeters <p>The term does not include an electric bicycle.</p>													
<p>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.</p>													
Signature of Owner				Printed name and Position (agent, trustee, etc., if applicable)					Date Signed (mm/dd/yyyy)				
Signature of Owner				Printed name and Position (agent, trustee, etc., if applicable)					Date Signed (mm/dd/yyyy)				
BMV USE ONLY													
Branch Name and Number				Visit ID				Date Processed (mm/dd/yyyy)					