

## APPLICATION FOR CERTIFICATE OF TITLE FOR A VEHICLE

State Form 205 (R12 / 8-24) INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-17.

\*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.

\*A certificate of title issued by the Indiana Bureau of Motor Vehicles may be possessed in either printed or electronic form. IC 9-17-2-4(d).

To be completed by a police officer, BMV official, or BMV certified dealer signee for out-of-state titles. I hereby certify that I personally examined the following vehicle and find the identification number to be as follows.								I swear or affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction.						
Vehicle Identification Number  Year Make Model Type Date (mm/dd/yyyy)								I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury.  Applicant Signature:						
				,	,	,,,,,	Printed	Printed Name:						
Inspecto	r's Printed Name	and Title	City	_				Applicant Signature:						
								Printed Name:						
Inspector's Signature Badge, Branch, or D					Dealer Plate		Date (mm/dd/yyyy):							
Transaction Number					Branch Nu					V Use Only				
Social Security Number / Federal Identification Number * Name of Applicant							<b>,</b>	BMV Use Only						
Residence Address (number and street)								City State ZIP Code					ZIP Code	
Vehicle Identification Number Veh					ehicle Year	icle Year Vehicle Make			Vehicle Model Vehicle Type			Odometer		
Former Title Number Purchas			urchase Da	e (mm/dd/yy) Lien (Y/N)		Speed (Y/N	)	Dealer Numb	per BM	BMV Use Only				
Electron	ic Lien and Title (	ELT) identif	umber	Holder of F	irst Lien, Morto	gage, or Other	or Other Encumbrance / Special Mailing Addre							
Mailing Address (number and street)					City			State	State ZIP Code		BMV Use Only			
Electronic Lien and Title (ELT) identification number Holder of Second Lien, Mortga								ther E	ncumbrance					
Mailing /	Address (number	and street)		City	City			State	ZIP Code		BMV Use Only			
License Number License Ye							r	Forms Used				1		
Gross Retail and Use Tax Affidavit – I/We hereby certify that sales or use tax on this vehicle was paid as indicated below.														
Selling F	Selling Price Less Trade-In / Discount			Amount Su	Amount Subject to Tax			Amount of Tax			Exempt	Exemption Code		
\$		\$			\$	\$		\$						