

BUREAU OF MOTOR VEHICLES

Registrations Department 100 North Senate Avenue, Room N483 Indianapolis, IN 46204 (888) 692-6841

INSTRUCTIONS:

- 1. Complete in blue or black ink, or print form.
- 2. Under Indiana Code 9-18.5-10-3.6, a person may furnish and display an authentic civic event license plate that was originally assigned to a civic event motor vehicle or another motor vehicle that was operated in conjunction with the same civic event in which the civic event motor vehicle was operated.
- 3. A person requesting to display an authentic civic event plate must complete and mail this form to the address listed on the top right-hand corner.
- 4. Along with this affidavit, the affiant must mail a color photo of the civic event license plate.

						SECT	ION 1 – 0	OWNER I	NFORMA	ATION							
Name of	Name of Registrant(s)																
Street Address (number and street)									City				State ZIP Code				
Sileei A	uui ess (IIu	inber and s	sueet)						Gity				State	211	Code		
	SECTION 2 - CONTACT INFORMATION																
Telepho	ne Number	•					E-mail address										
						SECTI	ION 3 – V	EHICLE	INFORM.	ATION							
Vehicle Identification Number (VIN):																	
Year					Make						Model						
i c ai					IVIANC						Woder						
SECTION 4 – AUTHENTIC CIVIC EVENT LICENSE PLATE																	
Duplicate plate numbers are not permitted. If the civic event plate number that you are requesting to display is already registered to another																	
vehicle, your request will be denied.																	
Name of	Civic Ever	nt						Civ	Civic Event License Plate Number								
SECTION 5 – AFFIRMATION																	
l swea	r or affi	rm unde	r the pe	enalties ¹	for peri	urv that	the info	rmation	entere	d on this	s form is	s true ai	nd corre	ct. and	that the		
above	I swear or affirm under the penalties for perjury that the information entered on this form is true and correct, and that the above described civic event plate was originally assigned to a civic event motor vehicle that was operated in conjunction with																
the sa	me civio	event i	n which	the mo	tor vehi	icle was	operate	ed.									
Signature of Registrant						Printed Name and Position (agent, trustee, etc., if a					pplicable)	ole) Date Signed (mm/dd/yyyy)					