



ADDING OR REMOVING OWNER, OFFICER OR PARTNER

State Form 55954 (R5 / 07-24)

<p>INDIANA SECRETARY OF STATE AUTO DEALER SERVICES DIVISION 302 West Washington Street, Room E-111 Indianapolis, IN 46204 Telephone: 317-234-7190 Fax: 317-233-1915 Dealers@sos.in.gov</p>

- INSTRUCTIONS:**
1. Complete electronically, or if printed, use blue or black ink.
 2. By completing this form, the dealer is requesting the Auto Dealer Services Division add or remove an owner, officer, or a partner from dealer's license.
 3. Submit the completed form to the Auto Dealer Services Division by mail, fax, hand delivery, or scan and e-mail to dealers@sos.in.gov.
 4. All owners, officers, or partners currently on the license, including the owner, officer, or partner being removed from the license, must sign this form affirming the request.
 5. If you are adding an owner, officer, or partner, you must include a copy of the front and back of a government issued identification for that individual. If you are removing an owner, officer, or partner due to their death or incapacity, you must include official documentation.
 6. A separate form must be completed for each addition or removal of an owner, officer, or a partner.

DEALER INFORMATION			
Name of Dealer	Dealer Number	Current TIN	New TIN (if applicable)
Telephone Number ()		E-mail Address	
OWNER, OFFICER, PARTNER BEING ADDED OR REMOVED			
I request that the individual named below be:			
<input type="checkbox"/> Added to the license identified above.		<input type="checkbox"/> Removed from the license identified above	
Name of New Owner, Officer or Partner	Title	Last 4 of SSN	Year of Birth
Address of Owner, Officer or Partner (number and street)		City	State ZIP Code
Telephone Number ()	E-mail Address	Effective Date (mm/dd/yyyy)	
Signature of Owner, Officer or Partner Being Removed or Added			Date (mm/dd/yyyy)
Printed Name of Owner, Officer or Partner, Being Removed or Added		Title	
CURRENT OWNER, OFFICER OR PARTNER AFFIRMATION (Attach additional sheets with owner information if necessary)			
By signing below, I hereby request that the Secretary add or remove the above-identified owner, officer, or partner of the dealer listed above based on my selection above. I swear or affirm 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.			
Signature of Owner, Officer, or Partner			Date (mm/dd/yyyy)
Printed Name of Owner, Officer, or Partner		Title	
Signature of Owner, Officer, or Partner			Date (mm/dd/yyyy)
Printed Name of Owner, Officer, or Partner		Title	
Signature of Owner, Officer, or Partner			Date (mm/dd/yyyy)
Printed Name of Owner, Officer, or Partner		Title	
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