

APPLICATION FOR SPECIAL IDENTIFICATION NUMBER – MOTOR VEHICLE OR WATERCRAFT

State Form 12907 (R5 / 10-12) INDIANA BUREAU OF MOTOR VEHICLES BUREAU OF MOTOR VEHICLES

100 North Senate Avenue, N417 Indianapolis, IN 46204

INSTRUCTIONS:

- 1. Complete in blue or black ink or print form.
- 2. Proof of ownership for vehicle or watercraft and/or parts must be submitted with the application.
- 3. VIN inspection, State Form 39530, must be completed by a law enforcement officer and submitted with the application.
- 4. Include a side view, color photograph of the entire vehicle or watercraft. For manufactured homes a photograph of the front and back of the home is required.

APPLICANT INFORMATION							
Name (last, first, middle initial or company name)				Driver's License or Federal Identification Number			
Address (number and street) City							
Address (number and street)					State	ZIP Code	
VEHICLE OR WATERCRAFT INFORMATION							
Original Identification Number (include any numbers that remain or "none")			Year	Make		Model	
Vehicle or Watercraft Type License Plate or Watercraft Registration Number (if known) Length (for watercraft, ft/in)							
From whom purchased (if applicable):							
Name							
Address (number and street) City					State	ZIP Code	
, and the second							
Reason for request:							
Identification Number not installed Explain reason not installed							
☐ Identification Number altered or defaced Explain cause of alteration or defacement							
☐ Privately Assembled Motor Vehicle			☐ Privately Assembled Watercraft				
PRIVATELY ASSEMBLED VEHICLE OR WATERCRAFT Check the major component parts used to assemble vehicle or watercraft.							
☐ Engine/Motor		☐ Transmission					
☐ Body Chassis		☐ Front Assembly					
☐ Rear Clip		☐ Frame					
Other (please specify):							
This application is submitted to request the Bureau of Motor Vehicles to issue a special identification number to the vehicle or watercraft described above. I certify that the above vehicle or watercraft conforms to applicable state and federal equipment and safety standards.							
I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.							
Signature	Printed Nar	ne				Date Signed (mm/dd/yyyy)	