

## **BUREAU OF MOTOR VEHICLES**

Central Office Finance 100 N. Senate Avenue, Room N440 Indianapolis, IN 46204 (888) 692-6841 www.bmv.in.gov

## INSTRUCTIONS:

Name (last, first, middle initial)

- 1. Complete in blue or black ink or print form.
- 2. A person, as defined by Indiana Code §9-13-2-124, may present this affidavit to clarify any differences or discrepancies between owner name as indicated on a title and/or registration application. This includes individuals and business entities.

Name (last, first, middle initial)

- 3. The One and the Same Person Affidavit must not be used to circumvent or skip a dealer reassignment.
- 4. Individuals must fill out Section 1. Business entities must fill out Section 2. Dealers must complete Section 3.

**SECTION 1 - INDIVIDUALS** 

SIGNATURE						
I swear or affirm that the information I have entered on this form is correct and the individuals named above are one and the same. I understand that making a false statement may constitute the crime of perjury.						
Signature of Affiant Printed Name			Date		ate Signed (mm/dd/yyyy)	
<u>'</u>						
SECTION 2 - BUSINESS ENTITIES						
Business Name			Business Name			
Federal Identification Number			Federal Identification Number			
Address (number and street)			Address (number and street)			
City	State	ZIP Code	City	State	ZIP Code	
SIGNATURE						
I swear or affirm that the information I have entered on this form is correct and the business entities named above are one and the same. I understand that making a false statement may constitute the crime of perjury.						
Signature of Affiant Printed Name		Date Signed (mm/dd/yyyy)		i (mm/dd/yyyy)		
SECTION 3 – REGISTERED INDIANA DEALERS						
Business Name			Business Name			
Dealer Number			Dealer Number			
Address (number and street)			Address (number and street)			
City	State	ZIP Code	City	State	ZIP Code	
SIGNATURE						
I swear or affirm that the information I have entered on this form is correct and the registered dealers named above are one and the same. I understand that making a false statement may constitute the crime of perjury.						
Signature of Affiant Printed Name				Date Signed (mm/dd/yyyy)		
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