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## REPORT OF STOLEN LICENSE PLATE OR REGISTRATION DECAL

State Form 37135 (R6 / 12-24)  
INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-18.1-11-8.

- INSTRUCTIONS:**
1. Complete in blue or black ink or print form.
  2. Stolen license plates and watercraft, off-road vehicle, and snowmobile registration decals are required to be reported to law enforcement. Section 1 of this form must be completed by a law enforcement agency.
  3. After law enforcement has completed Section 1, the form must be presented to a BMV branch at time of application for a replacement license plate or registration decal.

### SECTION 1- TO BE COMPLETED BY LAW ENFORCEMENT AGENCY

Name of Law Enforcement Agency				
Street Address (number and street)		City	State	ZIP Code
Vehicle Identification Number (VIN) / Hull Identification Number (HIN):				License Plate Number / Indiana Registration Number:
The undersigned law enforcement officer certifies that the license plate or registration decal identified on this form has been reported as stolen.				
Signature of Officer		Printed Name of Officer	Badge Number	Date Signed (mm/dd/yyyy)

### SECTION 2- TO BE COMPLETED BY APPLICANT

License plate numbers that have been reported as stolen to law enforcement cannot be reissued. You will receive a new license plate number when this form is presented to a BMV branch at time of application for a replacement license plate.

If the stolen license plate or registration decal is found, you may destroy and dispose of the item. You are not required to turn the license plate or registration decal into law enforcement or the Indiana BMV.

Printed Name of Registrant(s) (first, middle, last, or company name)				
Registrant(s) Residence Address (number and street)		City	State	ZIP Code
I swear or affirm under the penalties of perjury that the information I have entered on this form is true and accurate.				
Signature of Applicant				Date Signed (mm/dd/yyyy)

### SECTION 3- LICENSE BRANCH USE ONLY

Branch STARS Name	Branch STARS Number
Visit Identification	Date Processed (mm/dd/yyyy)