



SALVAGE TITLE AFFIDAVIT

State Form 49891 (R4 / 12-24)
INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-22-3.

INSTRUCTIONS: 1. Complete in blue or black ink or print form.

2. A certificate of salvage title is required for a motor vehicle, motorcycle, semitrailer, pursuant to the requirements as outlined in Indiana Code §9-22-3.

SECTION 1 - OWNER INFORMATION														
Owner Name(s) (last, first, middle initial or company name)														
Legal Address (number and street)							City				State		ZIP Code	
SECTION 2 – INSURANCE COMPANY INFORMATION (if applicable)														
Company Name							Agent Name							
Address (number and street)							City				State		ZIP Code	
SECTION 3 - VEHICLE INFORMATION														
Vehicle Identification Number														
Vehicle Year					Vehicle Make					Vehicle Model				
Date of Settlement (mm/dd/yyyy)					Reason									
SECTION 4 – AFFIRMATION STATEMENT														
I hereby request the Indiana Bureau of Motor Vehicles to issue a salvage title for the above mentioned vehicle. I certify that the vehicle meets the salvage title requirements of Indiana Code §9-22-3.														
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. I agree to indemnify and hold harmless the Indiana Bureau of Motor Vehicles from any liability arising from this transaction.														
Signature of Owner					Printed Name					Date Signed (mm/dd/yyyy)				