



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)