



# APPLICATION FOR CERTIFICATE OF WATERCRAFT TITLE

State Form 38529 (R12 / 7-25)

INDIANA BUREAU OF MOTOR VEHICLES

The legal authority for this form is IC 9-17.

\* This agency is requesting disclosure of your Social Security Number / Federal Identification Number in accordance with IC 4-1-8-1; disclosure is mandatory, and this record cannot be processed without it.

\* This agency is requesting disclosure of your Driver's License Number and Date of Birth in accordance with 33 CFR 174.17; disclosure is mandatory, and this record cannot be processed without it.

\* A certificate of title issued by the Indiana Bureau of Motor Vehicles may be possessed in either printed or electronic form. IC 9-17-2-4(d).

\* An electronic title is a digital representation of a vehicle's certificate of title, serving as a replacement for a paper title. If no selection is made, an electronic title will automatically be issued.

To be completed by a police officer, BMV official, or BMV certified dealer signee for out-of-state titles. I hereby certify that I personally examined the following watercraft and find the identification number to be as follows.				I swear or affirm that I am authorized to perform this transaction, and I agree to indemnify and hold harmless the Indiana BMV from any and all liability arising from this transaction.																					
Hull Identification Number				I swear or affirm that the information that I have entered on this form is correct. I understand that making a false statement on this form may constitute the crime of perjury.																					
<table border="1"><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>																						Applicant Signature: _____			
Year		Make		Registration Number		Date (mm/dd/yyyy)		Printed Name: _____																	
Inspector's Printed Name and Title				City				Applicant Signature: _____																	
Inspector's Signature				Badge, Branch, or Dealer Plate Number				Printed Name: _____																	
								Date (mm/dd/yyyy): _____																	
Title Format Preference (Select only one option)    Electronic <input type="checkbox"/> Paper <input type="checkbox"/>																									
Transaction Number			Branch Number		Invoice Number		BMV Use Only																		
Registration Number			Former Title Number			Purchase Date (mm/dd/yyyy)			Make																
Series or Model			Hull Identification Number			Length		Year		Hull Type															
Watercraft Type			Watercraft Use			Propulsion Type			Fuel Type																
Social Security Number / Federal Identification Number *				Driver's License Number *		Date of Birth (mm/dd/yyyy) *		Horsepower		Applicant's County of Residence															
Name of Applicant						Street Address (number and street)																			
City						State			ZIP Code																
Electronic Lien and Title (ELT) identification number				Holder of First Lien, Mortgage, or Other Encumbrance / Special Mailing Address																					
Mailing Address (number and street)				City		State		ZIP Code		BMV Use Only															
Electronic Lien and Title (ELT) identification number				Holder of Second Lien, Mortgage, or Other Encumbrance																					
Mailing Address (number and street)				City		State		ZIP Code		Dealer Number															
Gross Retail and Use Tax Affidavit – I / We hereby certify that sales or use tax on this watercraft was paid as indicated below.																									
Selling Price		Less Trade-In / Discount		Amount Subject to Tax		Amount of Tax		Dealer		Branch		Exempt		Exemption Code											
\$		\$		\$		\$																			