



MECHANIC'S LIEN BILL OF SALE

State Form 23104 (R6 / 7-16)
INDIANA BUREAU OF MOTOR VEHICLES

BUREAU OF MOTOR VEHICLES

100 North Senate Avenue, N411
Indianapolis, IN 46204

* This agency is requesting disclosure of your Social Security number / Federal Identification number for accuracy of records in accordance with IC 4-1-8; disclosure is voluntary and you will not be penalized for refusal.

- INSTRUCTIONS:**
1. Complete in blue or black ink, or print form.
 2. Seller must complete this form in its entirety and deliver to the purchaser of a vehicle in accordance with Indiana Code 9-22 in order for purchaser to obtain a certificate of title.
 3. A certificate or affidavit of publication from the newspaper verifying the vehicle was advertised for sale at public auction must be submitted with this form. The vehicle may not be sold before fifteen (15) days after the date of the advertisement.
 4. Proof of the mechanic's lien notice to owner and lienholder (if applicable) must be provided with this form.

SECTION 1 - SELLER INFORMATION

Person who holds the mechanic's lien

Name of Seller (first, middle, last, or company name)		*Social Security Number or Federal Identification Number (optional)			
Address of Seller's Residence (number and street)		City	State	ZIP Code	

SECTION 2 - OWNER / VEHICLE INFORMATION

Name of Owner(s) (first, middle, last, or company name)						
Last Known Address of Owner's Residence (number and street)			City	State	ZIP Code	
Vehicle Identification Number	Vehicle Year	Vehicle Make	Vehicle Model	Vehicle Type	Vehicle Color	License Plate Number

SECTION 3 - LIEN INFORMATION

Eligible Lien Type: (required)		The charges and costs against the vehicle are as follows:			
<input type="checkbox"/> Labor, Materials, Storage, or Repair Work Lien (Mechanic's lien)		Repair Work – Labor	Materials	Storage	Total
<input type="checkbox"/> Abandoned Vehicle Lien		\$	\$	\$	\$
Date Vehicle Left in Seller's Custody (mm/dd/yyyy)	Newspaper Name			Advertisement Date (mm/dd/yyyy)	
Auction Company/Auctioneer Name	Signature		Auction Company/Auctioneer License Number		

I swear and affirm under penalties for perjury that I am the Seller of the Vehicle identified on this form, and I affirm that the following is true and correct:

1. The Owner requested that the Vehicle be repaired or stored and/or the Vehicle has been abandoned.
2. The Vehicle was left in the Seller's custody and the Owner failed or refused to claim the Vehicle within thirty (30) days.
3. The Owner was notified by certified mail that the Vehicle would be sold at public auction to satisfy the above charges.
4. The Vehicle was advertised for sale at a public auction.

Signature of Seller	Printed Name	Date Signed (mm/dd/yyyy)
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SECTION 4 - PURCHASER INFORMATION

Name of Purchaser(s) (first, middle, last, or company name)		* Social Security Number or Federal Identification Number (optional)			
Address of Purchaser's Residence (number and street)		City	State	ZIP Code	
Date of Sale (mm/dd/yyyy)	Purchase Price				
	\$				

I swear and affirm under the penalties for perjury that the information I have entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.

Signature of Purchaser	Printed Name	Date Signed (mm/dd/yyyy)
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