

STATE OF INDIANA)
)
COUNTY OF RUSH)

IN THE RUSH SUPERIOR COURT
SS:
CAUSE NO.

IN THE MATTER OF:
VEICLE TITLE REQUEST
FOR: _____

VIN# _____

VERIFIED REQUEST FOR COURT
ORDER FOR VEHICLE TITLE

Comes now the Petitioner _____ and requests that the Court issue an order to the Indiana Bureau of Motor Vehicles to issue a title for the following vehicle and in support of said request states, under oath, that the following is true:

Petitioner's Full Name: _____

Petitioner's Address: _____

Telephone: _____

Description of Vehicle: _____

Type of Vehicle: _____

Make/Model: _____

Year: _____

Estimated Value: _____

VIN: _____

1. I acquired ownership of said motor vehicle from:

2. Name, Address, and all other known information regarding the previous owner of record of current title: _____

3. I do not have the last issued certificate of title because:

(Please attach any documents including bills of sale, titles, etc.)

I AFFIRM UNDER PENALTY OF PERJURY THAT THE FOREGOING REPRESENTATIONS ARE TRUE.

Date: _____ Signature: _____

Printed: _____



ODOMETER DISCLOSURE STATEMENT

State Form 43230 (R3 / 5-13)
INDIANA BUREAU OF MOTOR VEHICLES

- INSTRUCTIONS:**
1. In accordance with federal and state law, the seller of a motor vehicle must disclose the current mileage to a purchaser in writing upon transfer of ownership. The disclosure must be signed by the seller, including the printed name. If more than one person is a seller, only one seller is required to sign the written disclosure.
 2. The purchaser must sign the disclosure statement, including printed name and address, and return a copy to the seller.
 3. Complete this form in its entirety, in blue or black ink.

Federal and State law requires that you state the mileage upon transfer of ownership. Failure to complete or providing a false statement may result in fines, imprisonment, or both.

I, _____ residing at:
Printed name(s) of Seller(s)

_____ certify to the best of my knowledge that the
Address of Seller(s) (number and street, city, state, and ZIP code)

odometer reading is the actual mileage of the vehicle described below unless one of the following statements is checked:

Miles (no tenths)

1. I hereby certify that to the best of my knowledge the odometer reading reflects the amount of mileage in excess of its mechanical limits.
2. I hereby certify that the odometer reading is NOT the actual mileage and should not be relied upon. **WARNING - ODOMETER DISCREPANCY.**

Vehicle Make	Vehicle Model	Vehicle Year	Vehicle Body Type
Vehicle Identification Number (VIN)			Transfer Date (month, day, year)
I will not hold the Bureau of Motor Vehicles or the Bureau of Motor Vehicles Commission responsible for any discrepancy shown on the odometer reading. I, the undersigned, swear or affirm that the information entered on this form is correct. I understand that making a false statement may constitute the crime of perjury.			
Signature(s) of Seller(s)			Date (month, day, year)

PURCHASER'S INFORMATION

I am aware of and acknowledge the above odometer certification made by the seller(s).

Signature(s) of Purchaser(s)	Date (month, day, year)	
Printed Name(s) of Purchaser(s)		
Address of Purchaser(s) (number and street)		
City	State	ZIP Code



PHYSICAL INSPECTION OF A VEHICLE OR WATERCRAFT

State Form 39530 (R5 / 12-11)
 Approved by State Board of Accounts, 2011
 INDIANA BUREAU OF MOTOR VEHICLES

- INSTRUCTIONS:**
1. Approved inspector must complete information in blue or black ink or print form.
 2. The vehicle identification number (VIN) or hull identification number (HIN) must be inspected to verify the existence and condition of the number. An ownership document is not required to be submitted for inspection.
 3. Inspections may be performed by an employee of a dealer designated by the Indiana Secretary of State, a military policeman assigned to a military post in Indiana, a police officer, or a designated employee of a BMV full or partial service license branch.
 4. Police officers completing this form may not charge a fee of more than \$5.00 for vehicles. No fee may be collected for watercraft inspections. Authorized Indiana dealers and BMV full or partial service license branches may not assess a fee.
 5. Dealers may not perform watercraft inspections.

OWNER INFORMATION												
Name (last, first, middle initial or company name)												
Address (number and street)												
City										State		ZIP Code
VEHICLE OR WATERCRAFT INFORMATION												
Identification Number												<input type="checkbox"/> NONE (select if no identification number found)
Year	Make	Model		Type	Plate Number / State			Watercraft Registration Number, if applicable				
For assembled vehicles or watercraft include serial numbers for major component parts if present:												
Engine / Motor						Transmission						
Body Chassis						Front Assembly						
Rear Clip						Frame						
Other (specify):												
*IDACS / NCIC Check (required if form is completed by a police officer)												
Date Check Performed (mm/dd/yyyy)				Comments								
I swear or affirm that the information I have entered on this form is correct. I understand making a false statement may constitute the crime of perjury.												
Signature of Inspector				Printed Name				Title		Date (mm/dd/yyyy)		
Badge / Branch / Dealer Number				Police Department / Branch / Dealership				City		ZIP Code		
Telephone Number ()				Email Address								