

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 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.
 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.
 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.

			NO	IER INFO	RMATION		,					
Name (last, first,	middle initial or compan	y name										
Address (numbe	r and street)											
City									State		ZIP Code	
City									ı			
		VEI	HICLE OR V	VATERC	RAFT INFO	RMATIO	N				·	
							□ ио	NE (selec	t if no i	dentificat	ion number fo	ound)
Identification Number												
Year	Make	Model		Туре	Plate Nun		mber / State			Watercraft Registration Number, if applicable		
For assemb	led vehicles or wa	atercraft include	serial num	bers for	major comt	onent p	arts if	present:				
Engine / Motor	in the second se				Transmission							
					Front Assemb	du.						
Body Chassis	•		Finit Assembly									
Rear Clip			Frame									
(Celli Onp												
Other (specify):		***************************************										
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*IDACS / NO	CIC Check (require	d if form is compl	eted by a po	olice offic	er)		* /-		•		1	
	formed (mm/dd/yyyy)	Comments			-							
I swear or a	ffirm that the info he crime of perjur	rmation I have e y.	ntered on t	his form	is correct.	1 under	stand r	naking a	false	stateme		
Signature of Inspector			Printed Nar	Printed Name			Title				Date (mm/c	id/yyyy)
							0.5				ZIP Code	
Badge / Branch	Police Dep	Police Department / Branch / Dealership			City				ZIP Code			
	Email Addr	Email Address										
Telephone Nun	ilbei											